

**BROWN COUNTY HEALTH & HUMAN SERVICES**

111 N. Jefferson Street  
P.O. Box 22188  
Green Bay, WI 54305-3600



Erik Pritzl, Executive Director

**MEETING OF THE HUMAN SERVICES BOARD**

**Thursday, February 13, 2020**

**5:15 PM**

**SOPHIE BEAUMONT BUILDING  
111 N JEFFERSON STREET; BOARDROOM A  
GREEN BAY, WI 54301**

**AGENDA**

1. Call Meeting to Order
2. Approve/Modify Agenda
3. Approve Minutes of November 14, 2019 Human Services Board Meeting
4. Welcome new Human Services Board Member, Kathryn Dykes
5. Executive Director's Report
  - a. January 2020\*
  - b. February 2020
6. CTC Administrator Report including NPC Monthly Report
  - a. January 2020\*
  - b. February 2020\*
7. Re-appointment of Stacy Luedeman to the Psychiatric/Medical Staff Committee
8. Approval of Drug Formulary for Community Treatment Center\*
9. Financial Report for Community Treatment Center and Community Services
  - a. January 2020\*
  - b. February 2020
10. Statistical Reports
  - a. Monthly CTC Data – Bay Haven Crisis Diversion/Nicolet Psychiatric Center/Bayshore Village
    - i. December 2019\*
    - ii. January 2020\*
    - iii. February 2020\*
  - b. Child Protection Services – Child Abuse/Neglect Report
    - i. December 2019\*
    - ii. January 2020\*
    - iii. February 2020
  - c. Monthly Contract Update
    - i. January 2020\*
    - ii. February 2020\*

*continued on next page*

**Human Services Board Members:**

Tom Lund, County Board Supervisor & Board Chair  
Aaron Linssen, County Board Supervisor  
Alex Tran, County Board Supervisor  
Paula Laundrie, Citizen Board Member & Vice Chair  
Craig Huxford, Citizen Board Member

Susan Hyland, Citizen Board Member  
Laura McCoy, Citizen Board Member  
Kathryn Dykes, Citizen Board Member  
VACANT, Citizen Board Member

11. Request for New Non-Contracted Provider & New Provider Contract
  - a. January 2020\*
  - b. February 2020\*
12. Adjourn Business Meeting

*\*Attached as written reports.*

**Notices:**

Notice is hereby given that action by the Human Services Board may be taken on any of the items, which are described or listed in this agenda.

Please take notice that additional members of the Board of Supervisors may attend this meeting of the Human Services Board, resulting in a majority or quorum of the Board of Supervisors. This may constitute a meeting of the Board of Supervisors for purposes of discussion and information gathering relative to this agenda.

Any person wishing to attend the Human Services Board meeting who, because of a disability, requires special accommodations, should contact the Health & Human Services Department at (920) 448-6006 by 4:30 p.m. on the day before the meeting so arrangements can be made.

## BROWN COUNTY HEALTH & HUMAN SERVICES

111 N. Jefferson Street  
P.O. Box 22188  
Green Bay, WI 54305-2188



Erik Pritzl, Executive Director

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Phone (920) 448-6000 Fax (920) 448-6166

To: Human Services Board  
Human Services Committee

From: Erik Pritzl, Executive Director

Date: January 9, 2020

Re: Executive Director's Report

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### General Updates:

- The Criminal Justice Services program area has been very active, with just over 2,400 Public Safety Assessments completed in 2019. Safety Rates (no new criminal charges) and Appearance Rates for court hearings are both over 90%. This program area became operational in May, 2019 and when a full year of data is available more information will be provided.
- There are no updates to share on the Secure Residential Care Center for Children and Youth (SRCCCY) at the State level.
- Recruitment for many new positions is underway in Child Protective Services and Behavioral Health. This is generating some internal movement and will lead to additional recruitments to fill positions.
- Final design meetings for the Crisis Assessment Center at the CTC have wrapped up, and the next phase will be bidding on the project.

### 2019 Department Highlights:

#### *Community Services*

- Continued reduction in Emergency Detentions for mental health consumers. This can reduce time by other system partners such as the Courts, and Law Enforcement
- Expansion of Medication Assisted Treatment (MAT) for offenders in the jail, with the first injection starting while the person is incarcerated and then continuing with an outpatient provider.
- Successfully recruiting a clinician for the officer-clinician team with the Green Bay Police Department mental health officers. This person started in June, 2019.
- Engaged with elected representatives at the State level to advocate for increased funding in Child Welfare. This was successful, and Brown County saw an increase in the allocation of just over \$1.2M.

- Created the Criminal Justice Services program area, and transferred all Treatment Court and Criminal Justice services to this new area by July 1, 2019.
- Transitioned Child Care to a streamlined application process that is a “one touch” model of service with cross-trained Economic Support Specialists.
- Opened the Family Visitation Center in Child Protective Services. This was a community collaboration between Leadership Green Bay, Capital Credit Union, Health & Human Services, Neighbor Works, Friends of PALS, and other community members.
- Responded to flood-related needs collaboratively with Red Cross and the Public Health division to open a reception center that transitioned to a shelter at Preble High School.

#### *Public Health*

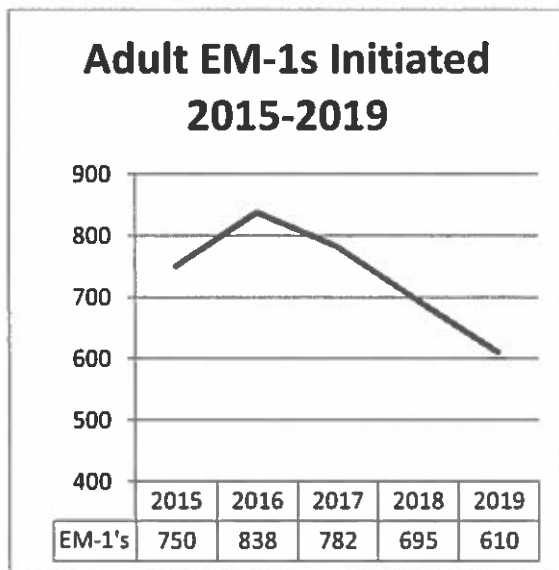
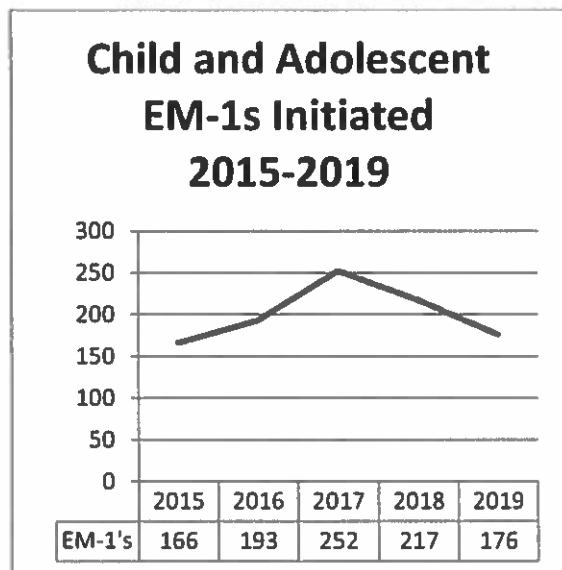
- Assessed the home visitation program and services with internal and external stakeholders to identify the model of service going forward and the role of Public Health. Initially the division was going to continue and expand services, but after further assessment it was determined that gaps could be filled by community partners.
- Completed the DHS 140 review of Public Health Services and maintained the highest level of certification—Level III.
- Relocated to the Sophie Beaumont Building at the end of February, 2019. This move had little disruption in services to the public, and went very well.

#### *Community Treatment Center*

- On track for a second positive financial closeout of the calendar year.
- Maintained high utilization of units, with Nicolet Psychiatric Center exceeding budgeted daily census, Bay Haven being close to budget (7.1 vs. 7.9), and Bayshore Nursing Home being close to budgeted census (60.4 vs. 61.3).
- Initiated the planning process for the Crisis Assessment Center addition, including medical screening services.
- Took leadership for creating standardized medical clearance guidelines for inpatient mental health facilities in Brown County.
- Completed the annual Nursing Home survey with no resident care deficiencies and in substantial compliance with regulations.

#### **Emergency Detentions:**

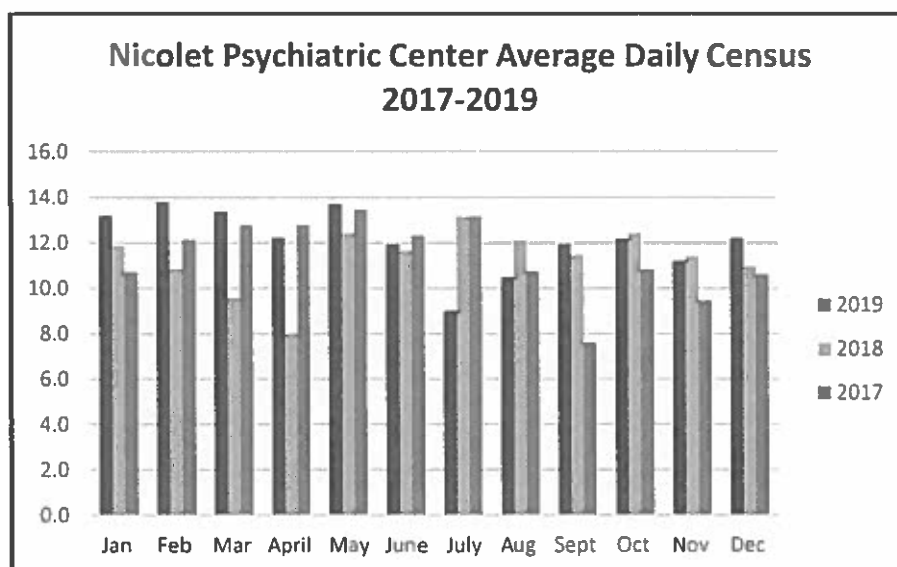
In the final numbers tracked in 2019, there was a decrease in the emergency detentions (EM-1s) initiated. The decrease in child and adolescent detentions initiated was about 19%, and the reduction in adult detentions initiated was about 12%. The charts that follow provide a five year history in this area.

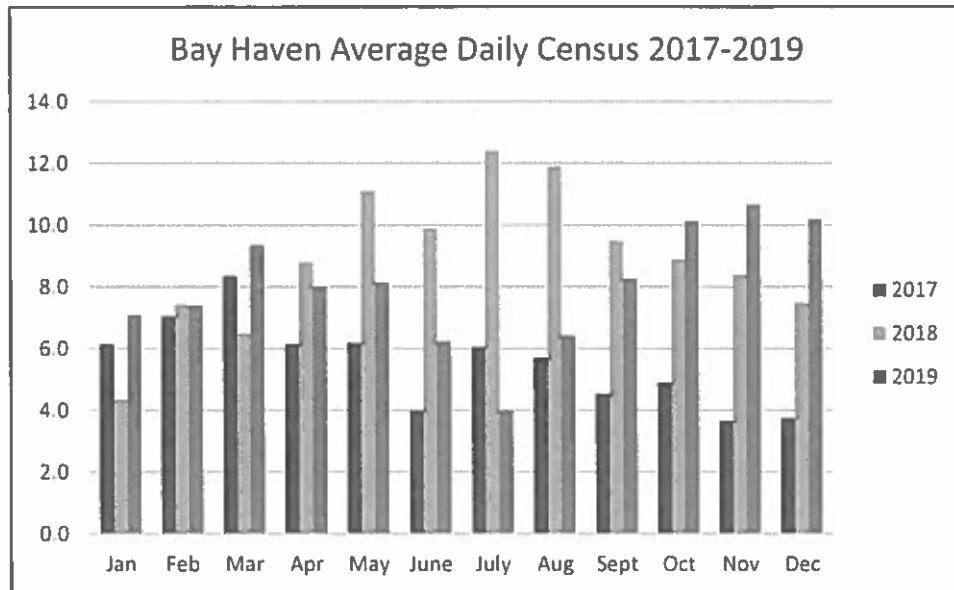


#### Community Treatment Center

The average daily census at our Community Treatment Center finished the year higher in 2019 than prior years. The average daily census for December was 12.2 at the Nicolet Psychiatric Center, and the average daily census at Bay Haven (CBRF) for December was 10.2. It's worth noting that voluntary admissions to the Nicolet Psychiatric Center made up 31% of the total admissions in 2019 compared to 24% in 2018.

Three years of average daily census at the Nicolet Psychiatric Center (NPC) and Bay Haven (CBRF) are presented visually in the charts below.





## BROWN COUNTY HEALTH & HUMAN SERVICES

Brown County Community Treatment Center  
3150 Gershwin Drive  
Green Bay, WI 54305-2188



Samantha Behling, Interim Hospital & Nursing Home Administrator

Phone (920) 391-4701 Fax (920) 391-4872

### **NPC Monthly Report- December 2019**

**Survey Readiness-** Nicolet Psychiatric Center has reduced seclusion time by 118 hours in 2019 following implementation of a quality improvement initiative. New quality improvement initiatives will be decided for 2020 within the month of January. Some of the proposed initiatives include discharge coordination and readmission rates. Federal and CMS re-certification surveys are expected to occur within 2020 for the psychiatric hospital. These surveys are unannounced. Psychiatric hospitals are subject to additional regulations beyond basic hospital conditions of participation in Medicare and Medicaid.

**Crisis Center Addition Planning-** The Crisis Center building design has been completed. The project will then be open to bidders early January. It has not yet been determined what to name the addition. Although, there is consideration for a trauma-informed or other experience-positive title.

**On-site Medical Clearance-** Planning continues for on-site medical clearance procedures. A workgroup is tasked to create procedures for basic medical screening as the organization aims to reduce presentations to emergency departments and streamline inpatient psychiatric admissions procedures. The level of skill necessary to perform the assessment, i.e. staffing and qualifications, along with on-site capabilities will need to be determined. The workgroup plans to communicate with community partners, promoting feedback and acceptance. The on-site medical clearance procedures are not expected to match emergency department capabilities. However, medical stability of low and moderate risk individuals may be determined without necessitating the emergency department.

**Other Business-** The Community Treatment Center is conducting interviews for Director of Nursing Home, as well as, Certified Occupational Therapist. The occupational therapist position is new for 2020. The goal of this skilled position is to expand mental health services, certify compliance with regulatory requirements and reduce contracted service costs. Changes are being considered for the Food and Nutritional Services Department in relation to compensation, working hours, position schedules and/or the division of duties relating to recruitment and retention concerns.

*Respectfully submitted by: Samantha Behling, Hospital and Nursing Home Administrator*

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Brown County Community Treatment Center  
3150 Gershwin Drive  
Green Bay, WI 54305-2188



Samantha Behling, Interim Hospital & Nursing Home Administrator

Phone (920) 391-4701 Fax (920) 391-4872

### **NPC Monthly Report- January 2020**

**Hospital Re-Certification Survey-** A routine, but un-announced re-certification survey was conducted on Nicolet Psychiatric Center January 27<sup>th</sup>-29<sup>th</sup>. Federal and State surveyors, along with Division of Quality Assurance building inspectors, completed an overview of our facility environment and other areas of regulatory compliance. This occurs once every three years. Formal deficiencies have not yet been issued. However, an exit survey indicated the following areas could be cited in a statement of deficiencies *(scope/severity unknown): social history documentation, treatment plans/goals, group attendance/alternatives, re-attempts at refusals (History and Physical), time/date physician orders, refrigerator temp monitoring, infection control (minor wall damage, item on floor), ligature risk (shower door hinges), documentation of skin conditions, absence of credentials within electronic documentation system (i.e. RN, MD), electrical outlet testing, time/clock on alarm panel, uneven concrete stoop and fire door rating of hospital entrance double-doors*. During the exit interview, surveyors reiterated that their focuses are on deficiencies; surveyors are not permitted to share positive feedback. Upon receipt of formal deficiencies, group efforts will occur as the hospital prepares for the Plan of Correction. This recertification experience is believed to be less critically severe than prior inspections. The anticipated citations in relation to treatment plans and group therapy are also experienced within other inpatient psychiatric hospitals. Many areas not mentioned were found to be in substantial compliance.

**Grievances/Concerns-** One grievance investigation occurred in January 2020 in relation to client treatment dignity and respect during a psychiatrist evaluation. The grievance was reviewed by a committee and addressed internally.

**Crisis Center Addition Planning and Medical Clearance-** The building project has been opened to bidders. The Human Services Committee requested additional collaboration with the bus line company; although, a bus stop remains in operation outside on the Center's campus. The Medical Clearance work-group continues planning for on-site medical screening. A draft policy and procedure has been created, as well as, consideration of a Wisconsin Psychiatric Association "SMART" Assessment form. Both have the intention of reducing use of emergency departments and assisting to implement basic medical screening. There has been discussion of trialing procedures prior to the new build.

**Other Business-** The Brown County Community Treatment Center continues to conduct interviews for Director of Nursing- Nursing Home. The area of Food and Nutritional Services Department has been experiencing difficulty in areas of recruitment and retention. For these reasons, a resolution has been proposed for a Table of Organization Change and improved compensation while internal review processes continue to occur while assessing all options to assist with staffing shortages. The areas of part-time and on-call nursing positions are also being examined for the area of recruitment, retention and incentives as there are difficult to fill evening and weekend positions with outstanding vacancies resulting in increased overtime and agency use. New hire orientation will expand in dedicated staffing time through a new pilot program for on-boarding C.N.A.s.

*Respectfully submitted by: Samantha Behling, Hospital and Nursing Home Administrator*



**BROWN COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT  
COMMUNITY TREATMENT CENTER  
PSYCHIATRIC HOSPITAL MEDICAL STAFF  
DRUG FORMULARY**

The Psychiatric/Medical Staff Committee approved the Drug Formulary prepared by HealthDirect at their January 14, 2020 meeting.

  
\_\_\_\_\_  
Yogesh Pareek, MD  
Clinical Director

1/21/20  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
John T. Warren, MD  
Medical Director

1/16/20  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Samantha Behling, NHA, RN, BSN  
Hospital and Nursing Home Administrator

1/16/20  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Erik Pritzl  
Executive Director

1/27/2020  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Thomas Lund  
Governing Body Chair

\_\_\_\_\_  
Date

Pursuant to Wisconsin Administrative Code DHS 124.15 (8)(b), this document sets forth a drug formulary for use in the hospital named on page 2 herein. Based on the decisions of the hospital's administrative staff and contracted pharmacists, the following Formulary Protocols are established. Each Formulary Protocol specifies the criteria an order must meet for an interchange to occur. These Formulary Protocols list both brand and generic names of target medications, however, medications will be dispensed in a generic form where available and permitted by law. This formulary shall serve as a "negative formulary"; medications not listed within this drug formulary as "non-formulary" remain available for use within the hospital and the contracted pharmacy shall deliver such medications upon request along with any named formulary medications.

Upon a change to a medication order as a result of a Formulary Protocol, HealthDirect will notify the facility's staff of the change upon dispensing the substituted medication.

Page	Non-Formulary Medication	Formulary Alternative	Agree	Disagree
3	dutasteride	finasteride		
4-5	ACE inhibitors	lisinopril		
6	ACE inhibitor/diuretic combination	lisinopril/hydrochlorothiazide		
7	ipratropium/albuterol (COMBIVENT)	ipratropium/albuterol (DUONEB)		
8	brimonidine 0.1%, 0.15%	brimonidine 0.2%		
9	carvedilol ER	carvedilol IR		
10	phenazopyridine 100mg, 200mg	phenazopyridine 95mg		
11-12	angiotensin receptor blockers (ARB)	losartan		
13-14	ARB/diuretic combination	losartan/hydrochlorothiazide		
15	mupirocin cream, retapamulin	mupirocin ointment		
16	olopatadine	ketotifen		
17	alfuzosin, silodosin	tamsulosin		
18	ibandronate, risedronate, alendronate effervescent	alendronate		
19	donepezil ER, galantamine, rivastigmine	donepezil		
20	celecoxib	meloxicam		
21	diltiazem LA	diltiazem CD		
22-23	fenofibrate, fenofibrate micronized, fenofibric acid	fenofibrate nanocrystal		
24	fluoxetine tablets	fluoxetine capsules		
25	gabapentin ER	gabapentin IR		
26-27	HMG-CoA reductase inhibitors	atorvastatin		
29	inhaled ICS/beta agonist	fluticasone/salmeterol (ADVAIR®)		
29	insulin aspart, NOVOLIN®, insulin detemir	insulin lispro, HUMULIN®, insulin glargine		
30	beclomethasone, budesonide, ciclesonide, flunisolide, fluticasone furoate, mometasone, triamcinolone nasal spray	fluticasone propionate nasal spray		
31	zafirlukast	montelukast		
32	lidocaine 5% patch	lidocaine 4% patch		
33	megestrol 625mg/5ml	megestrol 40mg/ml		
34	memantine ER	memantine IR		
35	diclofenac solution, patch	diclofenac 1% gel		
36	ondansetron film	ondansetron ODT tablet		
37	sevelamer hydrochloride	sevelamer carbonate		
38	bimatoprost, tafluprost, travoprost, unoprostone	latanoprost		
39-40	dexlansoprazole, esomeprazole, lansoprazole, rabeprazole	omeprazole		

41	albuterol (PROAIR®, PROVENTIL®, PROAIR RESPICLICK®), levalbuterol HFA	albuterol HFA (VENTOLIN HFA®)
41	levalbuterol solution	albuterol 0.083% solution
42-43	darifenacin, fesoterodine, oxybutynin transdermal/IR, solifenacin, tolterodine, trospium	oxybutynin ER
44	venlafaxine ER tablet	venlafaxine ER capsule

By signing below, I authorize HealthDirect Institutional Pharmacy Services, Inc (HealthDirect) to dispense formulary medications in accordance with the Formulary Protocols accepted by the hospital staff and contracted pharmacists as listed above. I have indicated which of these Formulary Protocols are authorized by selecting the appropriate box in the list above; Formulary Protocols which have been checked as "disagree" are not authorized for substitution.

I understand that I may discontinue any of the above Formulary Protocols by notifying both HealthDirect and the Facility in writing.

#### FACILITY REPRESENTATIVE

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Signature: \_\_\_\_\_

#### FACILITY

Name: Brown County Community Treatment  
Center – Nicolet Psychiatric Center

Address 3150 Gershwin Dr

Green Bay, WI 54311-5859

#### PHARMACY

Name: HealthDirect Institutional Pharmacy  
Services, Inc. #122

Address 3701 E Evergreen Dr, Ste 1000

Appleton, WI 54913

## 5-Alpha Reductase Inhibitors

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
Dutasteride (AVODART®)	0.5mg once daily	will be changed to	Finasteride (PROSCAR®)	5mg once daily

### Rationale

Finasteride is recommended over dutasteride (AVODART®) due to a similar efficacy and safety profile and the general lower price point of finasteride tablets.

### Monitoring Parameters

- Efficacy
- Patient Tolerance
- PSA

### References:

1. Gold Standard, Inc. Finasteride. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 4, 2019.
2. Gold Standard, Inc. Dutasteride. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 4, 2019.
3. Nickel JC. Comparison of clinical trials with finasteride and dutasteride. Rev Urol. 2004;6 Suppl 9(Suppl 9): S31–S39.

## Angiotensin Converting Enzyme Inhibitor (ACE-I) / Diuretic Combination

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose		Medication	Dose & Frequency
benazepril (LOTENSIN®)	TDD* = 5mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	5mg once daily
	TDD* = 10mg			10mg once daily
	TDD* = 20mg			20mg once daily
	TDD* = 40mg			40mg once daily
captopril (CAPOTEN®)	TDD* = 25 to 37.5mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	5mg once daily
	TDD* = 37.5 to 50mg			10mg once daily
	TDD* = 50 to 100mg			20mg once daily
	TDD* = 100 to 200mg			40mg once daily
enalapril (VASOTEC®)	TDD* = 2.5mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	2.5mg once daily
	TDD* = 5mg			5mg once daily
	TDD* = 10mg			10mg once daily
	TDD* = 20mg			20mg once daily
fosinopril (MONOPRIL®)	TDD* = 5mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	5mg once daily
	TDD* = 10mg			10mg once daily
	TDD* = 20mg			20mg once daily
	TDD* = 40mg			40mg once daily
moexipril (UNIVASC®)	TDD* = 7.5mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	10mg once daily
	TDD* = 15mg			20mg once daily
perindopril (ACEON®)	TDD* = 2mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	5mg once daily
	TDD* = 4mg			10mg once daily
	TDD* = 8mg			20mg once daily

Non-Formulary Medication			Formulary Alternative	
Medication	Dose		Medication	Dose
quinapril (ACCUPRIL®)	TDD* = 5mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	5mg once daily
	TDD* = 10mg			10mg once daily
	TDD* = 20mg			20mg once daily
	TDD* = 40mg			40mg once daily
ramipril (ALTACE®)	TDD* = 1.25mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	2.5mg once daily
	TDD* = 2.5mg			5mg once daily
	TDD* = 5mg			10mg once daily
	TDD* = 10mg			20mg once daily
trandolapril (MAVIK®)	TDD* = 1mg	will be changed to	lisinopril (PRINIVIL®/ZESTRIL®)	5mg once daily
	TDD* = 2mg			10mg once daily
	TDD* = 4mg			20mg once daily

## Rationale

Lisinopril offers once daily dosing, better tolerance, and a more favorable side effect profile when compared to other ACE inhibitors.

## Monitoring Parameters

- Blood Pressure
- Serum Creatinine
- BUN
- Serum Potassium

## References:

1. Gold Standard, Inc. Lisinopril. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 11, 2019.
2. Gold Standard, Inc. Angiotensin-Converting Enzyme (ACE) Inhibitors. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 11, 2019.
3. PL Detail-Document, ACEI, ARB, and Aliskiren Comparison. Pharmacist's letter/Prescriber's Letter. March 2013
4. PL Detail-Document, Angiotensin Converting Enzyme (ACE) Inhibitor Antihypertensive Dose Comparison. Pharmacist's letter/Prescriber's Letter. August 2009

## Angiotensin Converting Enzyme Inhibitor (ACE-I) / Diuretic Combination

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose		Medication	Dose
fosinopril/HCTZ (MONOPRIL HCT®)	TDD* = 10-12.5mg	will be changed to	lisinopril/HCTZ (ZESTORETIC®)	10/12.5mg once daily
	TDD* = 20-12.5mg			20/12.5mg once daily
Moexipril/HCTZ (UNIRETIC®)	TDD* = 7.5-12.5mg	will be changed to	lisinopril/HCTZ (ZESTORETIC®)	10/12.5mg once daily
	TDD* = 15-12.5mg			20/12.5mg once daily
	TDD* = 15-25mg			20/25mg once daily
Quinapril/HCTZ (ACCURETIC®)	TDD* = 10-12.5mg	will be changed to	lisinopril/HCTZ (ZESTORETIC®)	10/12.5mg once daily
	TDD* = 20-12.5mg			20/12.5mg once daily
	TDD* = 20-25mg			20/25mg once daily

### Rationale

Lisinopril offers once daily dosing, better tolerance, and a more favorable side effect profile when compared to other ACE inhibitors. Hydrochlorothiazide doses remain identical through the formulary interchange.

### Monitoring Parameters

- Blood Pressure
- Serum Creatinine
- BUN
- Serum Potassium

### References:

1. Gold Standard, Inc. Lisinopril, Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 11, 2019.
2. Gold Standard, Inc. Angiotensin-Converting Enzyme (ACE) Inhibitors. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 11, 2019.
3. PL Detail-Document, ACEI, ARB, and Aliskiren Comparison. Pharmacist's letter/Prescriber's Letter. March 2013

## Albuterol & Ipratropium Combinations

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
ipratropium/albuterol inhaler (COMBIVENT RESPIMAT®)	any frequency	will be changed to	ipratropium/albuterol solution for inhalation (DUONEB®)	0.5-2.5mg / 3mL same frequency as original order

### Rationale

Combivent Respimat® is a convenient dry powder multi-dose inhaler (MDI) containing both ipratropium and albuterol. The equivalent nebulized agent, ipratropium/albuterol solution, is available generically with a cost approximately 80% lower than the MDI version. While patient is in a skilled nursing facility and administration of nebulized product is appropriate, the generic solution is significantly less costly.

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Gold Standard, Inc. Albuterol; Ipratropium. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: April 14, 2016.



## Alpha Agonists, Ophthalmic

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
brimonidine 0.1% (ALPHAGAN P®)	any dose and directions	will be changed to	brimonidine 0.2% (ALPHAGAN®)	Same directions
brimonidine 0.15% (ALPHAGAN P®)				

### Rationale

All strengths of brimonidine offer similar effectiveness and safety profiles. Brimonidine 0.2% is priced less than the alternative strengths.

### Monitoring Parameters

- Efficacy
- Patient tolerance

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#### References:

1. Gold Standard, Inc. Brimonidine. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.

## Alpha & Beta Blocker Combinations

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
carvedilol ER (COREG CR®)	10mg once daily	will be changed to	carvedilol (COREG®)	3.125mg twice daily
carvedilol ER (COREG CR®)	20mg once daily	will be changed to	carvedilol (COREG®)	6.25mg twice daily
carvedilol ER (COREG CR®)	30mg once daily	will be changed to	carvedilol (COREG®)	12.5mg twice daily
carvedilol ER (COREG CR®)	40mg once daily	will be changed to	carvedilol (COREG®)	25mg twice daily

### Rationale

Carvedilol has comparable safety and efficacy to carvedilol CR (Coreg CR®) while being more cost favorable.

### Monitoring Parameters

- Blood pressure
- Pulse
- Efficacy
- Patient tolerance

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#### References:

1. Gold Standard, Inc. Carvedilol. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
2. Coreg CR [package insert]. Research Triangle Park, NC: GlaxoSmithKline; 2008.
3. Gold Standard, Inc. Beta-Blockers (systemic). Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.

## Analgesics, Urinary

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
phenazopyridine (PYRIDIUM®)	100mg, any frequency	will be changed to	phenazopyridine OTC	95mg, same frequency as original order
phenazopyridine (PYRIDIUM®)	200mg, any frequency	will be changed to	phenazopyridine OTC	190mg, same frequency as original order

### Rationale

Phenazopyridine 100mg and 95mg tablets offer similar efficacy and safety profiles. Phenazopyridine 95mg tablets are available over-the-counter at a reduced cost when compared to the prescription-only 100mg or 200mg versions.

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Gold Standard, Inc. Phenazopyridine. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.

## Angiotensin Receptor Blockers (ARB)

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
azilsartan (EDARBI®)	40mg once daily	will be changed to	losartan (COZAAR®)	50mg once daily
	80mg once daily			100mg once daily
candesartan (ATACAND®)	4mg once daily	will be changed to	losartan (COZAAR®)	25mg once daily
	8mg once daily			50mg once daily
	16mg once daily			100mg once daily
eprosartan (TEVETEN®)	400mg once daily	will be changed to	losartan (COZAAR®)	50mg once daily
	600mg once daily			100mg once daily
irbesartan (AVAPRO®)	75mg once daily	will be changed to	losartan (COZAAR®)	25mg once daily
	150mg once daily			50mg once daily
	300mg once daily			100mg once daily
olmesartan (BENICAR®)	10mg once daily	will be changed to	losartan (COZAAR®)	25mg once daily
	200mg once daily			50mg once daily
	40mg once daily			100mg once daily
telmisartan (MICARDIS®)	20mg once daily	will be changed to	losartan (COZAAR®)	25mg once daily
	40mg once daily			50mg once daily
	80mg once daily			100mg once daily
valsartan (DIOVAN®)	40mg once daily	will be changed to	losartan (COZAAR®)	25mg once daily
	80mg once daily			50mg once daily
	160mg once daily			100mg once daily

## Rationale

Cost, tolerance and adverse effect profile are comparable to other angiotensin receptor blockers. Although losartan is not FDA indicated for Heart Failure, it is commonly used for such.

## Monitoring Parameters

- Blood Pressure
- Serum Creatinine
- BUN
- Serum Potassium
- Serum Uric Acid
- Blood Glucose

## References:

1. Gold Standard, Inc. Angiotensin Receptor Blockers (ARBs) Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. Angiotensin receptor blocker (ARB) antihypertensive dose comparison. Pharmacist's Letter/Prescriber's Letter 2009 (Full update February 2012);25(8) 250801

## Angiotensin Receptor Blockers (ARB) / Diuretic Combinations

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
azilsartan / HCTZ (EDARBICLOR®)	40-12.5mg once daily	will be changed to	losartan / HCTZ (HYZAAR®)	50-12.5mg once daily
candesartan (ATACAND HCT®)	16-12.5mg once daily	will be changed to	losartan / HCTZ (HYZAAR®)	100-12.5mg once daily
eprosartan (TEVETEN HCT®)	600-12.5mg once daily	will be changed to	losartan / HCTZ (HYZAAR®)	100-12.5mg once daily
	600-25mg once daily			100-25mg once daily
irbesartan (AVALIDE®)	150-12.5mg once daily	will be changed to	losartan / HCTZ (HYZAAR®)	50-12.5mg once daily
	300-12.5mg once daily			100-12.5mg once daily
	300-25mg once daily			100-25mg once daily
olmesartan (BENICAR HCT®)	20-12.5mg once daily	will be changed to	losartan / HCTZ (HYZAAR®)	50-12.5mg once daily
	40-12.5mg once daily			100-12.5mg once daily
	40-25mg once daily			100-25mg once daily
telmisartan (MICARDIS HCT®)	40-12.5mg once daily	will be changed to	losartan / HCTZ (HYZAAR®)	50-12.5mg once daily
	80-12.5mg once daily			100-12.5mg once daily
	80-25mg once daily			100-25mg once daily
valsartan (DIOVAN HCT®)	80-12.5mg once daily	will be changed to	losartan / HCTZ (HYZAAR®)	50-12.5mg once daily
	160-12.5mg once daily			100-12.5mg once daily
	160-25mg once daily			100-25mg once daily

### Rationale

Cost, tolerance and adverse effect profile are comparable to other angiotensin receptor blockers. Although losartan is not FDA indicated for Heart Failure, it is commonly used for such. Hydrochlorothiazide doses remain identical through the formulary interchange.

## Monitoring Parameters

- Blood Pressure
- Serum Creatinine
- BUN
- Serum Potassium
- Serum Uric Acid
- Blood Glucose

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### References:

1. Gold Standard, Inc. Angiotensin Receptor Blockers (ARBs). Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. Angiotensin receptor blocker (ARB) antihypertensive dose comparison. Pharmacist's Letter/Prescriber's Letter 2009 (Full update February 2012);25(8):250801

## Antibiotics, Topical

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
mupirocin 2% cream (BACTROBAN®)	any	will be changed to	mupirocin 2% ointment (BACTROBAN®)	Same directions as original order
mupirocin 2% nasal ointment (BACTROBAN NASAL®)	any			
retapamulin 1% (ALTABAX®)	any			

### Rationale

Generic mupirocin ointment is significantly less expensive compared to non-formulary products with similar indications, safety and efficacy.

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Gold Standard, Inc. Mupirocin. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.



## Antihistamines, Ophthalmic

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
olopatadine 0.1% (PATANOL®)	One drop into the affected eye/s twice daily	will be changed to	ketotifen 0.0025% (ZADITOR®)	One drop into the affected eye/s twice daily
olopatadine 0.2% (PATADAY®)	One drop into the affected eye/s once daily			

### Rationale

Overall effectiveness and safety profile is similar between ketotifen and olopatadine products. With a lower cost, ketotifen is the preferred agent.

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Gold Standard, Inc. Olopatadine. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. Avunduk, Avni Murat et al. Comparison of the effects of ketotifen fumarate 0.025% and olopatadine HCl 0.1% ophthalmic solutions in seasonal allergic conjunctivitis: A 30-day, randomized, double-masked, artificial tear substitute-controlled trial. Clin Ther. 2005 Sep;27(9):1392-402.

## Benign Prostatic Hyperplasia (BPH) Alpha Blockers

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
alfuzosin (UROXATROL®)	10mg once daily	will be changed to	tamsulosin (FLOMAX®)	0.4mg once daily - may titrate to 0.8mg once daily as needed
silodosin (RAPAFLO®)	4 to 8mg once daily	will be changed to	tamsulosin (FLOMAX®)	0.4mg once daily - may titrate to 0.8mg once daily as needed

### Rationale

Efficacy is comparable among alpha blockers when treating BPH. Selectivity for receptor subtype Alpha-1a can reduce untoward effects such as orthostatic hypotension. Only tamsulosin and silodosin demonstrate such selectivity. Silodosin may require dose reduction if CrCl < 50ml/min and is contraindicated when CrCl < 30ml/min. Cost, unlikely need for dose titration, side effect profile and no need for dose adjustment in renal impairment suggest tamsulosin as the preferred agent.

### Monitoring Parameters

- Blood pressure
- Orthostatic hypotension assessment
- Patient response

#### References:

1. Gold Standard, Inc. Alpha Blockers. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
2. Manohar CMS, Nagabhushana M, Karthikeyan VS, Sanjay RP, Kamath AJ, Keshavamurthy R. Safety and efficacy of tamsulosin, alfuzosin or silodosin as monotherapy for LUTS in BPH - a double-blind randomized trial. Cent European J Urol. 2017;70(2):148-153. doi:10.5173/ceju.2017.924

## Bisphosphonates

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
alendronate effervescent tablet (BINOSTO®)	70mg once weekly	will be changed to	alendronate (FOSAMAX®)	70mg once weekly
ibandronate (BONIVA®)	2.5mg once daily			
	150mg once monthly			
risedronate ACTONEL®)	5mg once daily			
	35mg once weekly			
	150mg once monthly			
risedronate DR (ATELVIA®)	35mg once weekly			

### Rationale

Generic alendronate tablets are recommended over other oral bisphosphonates because it performs with similar safety and efficacy and is generally priced lower.

### Monitoring Parameters

- Efficacy
- Patient tolerance
- Bone density
- Serum calcium

#### References:

1. Gold Standard, Inc. Bisphosphonates. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
2. Grey A, Reid IR. Differences between the bisphosphonates for the prevention and treatment of osteoporosis. Ther Clin Risk Manag. 2006;2(1):77-86.
3. Miller PD, Epstein S, Sedarati F, Reginster JY. Once-monthly oral ibandronate compared with weekly oral alendronate in postmenopausal osteoporosis: results from the head-to-head MOTION study. Curr Med Res Opin. 2008 Jan;24(1):207-13.
4. Rosen HN. The use of bisphosphonates in postmenopausal women with osteoporosis. In: UpToDate, Post TW (Ed). UpToDate, Waltham, MA. Accessed November 05, 2019.

## Cholinesterase Inhibitors, Oral

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
donepezil ER (ARICEPT®)	23mg once daily	will be changed to	donepezil (ARICEPT®)	10mg twice daily
galantamine (RAZADYNE®)	4mg twice daily	will be changed to	donepezil (ARICEPT®)	5mg once daily
	8mg twice daily			10mg once daily
	8mg twice daily			10mg once daily
galantamine ER (RAZADYNE ER®)	8mg once daily	will be changed to	donepezil (ARICEPT®)	5mg once daily
	16mg once daily			10mg once daily
	24mg once daily			10mg once daily
rivastigmine (EXELON®)	1.5mg twice daily	will be changed to	donepezil (ARICEPT®)	5mg once daily
	3mg twice daily			5mg once daily
	4.5mg twice daily			10mg once daily
	6mg twice daily			10mg once daily

### Rationale

Cholinesterase Inhibitors are at best modestly effective and often only for the first couple years of therapy. Although slight differences in receptor type affinities exist, the cholinesterase inhibitors perform interchangeably and none ultimately change outcomes. Donepezil is better tolerated (lower incidence of nausea, vomiting, diarrhea and anorexia) and offers convenient once a day dosing. Donepezil ER is once daily, however, significantly more expensive compared to two donepezil 10mg tablets. With favorable pricing, once a day dosing and less adverse events, donepezil is the preferred product.

### Monitoring Parameters

- Efficacy
- Patient Tolerance

### References:

1. Gold Standard, Inc. Cholinesterase Inhibitors. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
2. Shao ZQ. Comparison of the efficacy of four cholinesterase inhibitors in combination with memantine for the treatment of Alzheimer's disease. Int J Clin Exp Med. 2015;8(2):2944-2948. Published 2015 Feb 15.

## COX-2 Inhibitors

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
celecoxib (CELEBREX®)	100mg twice daily	will be changed to	meloxicam (MOBIC®)	7.5mg once daily
	200mg once daily			7.5mg once daily
	200mg twice daily			15mg once daily
	400mg once daily			15mg once daily

### Exclusions from Recommendations

- Patients not receiving a proton pump inhibitor are excluded from this interchange due to the increased risk of gastrointestinal adverse effects
- Patients receiving anticoagulants are excluded from this interchange due to the increase risk of a gastrointestinal bleeding event.
- Patients receiving celecoxib prescribed by an orthopedic specialist following surgery are excluded from this interchange.

### Rationale

Meloxicam has comparable efficacy to celecoxib. Although both are available generically, meloxicam has favorable pricing. Safety and side effect profile are also comparable. FDA approved indications are greater for celecoxib; however contraindications for meloxicam are significantly less. Additionally, celecoxib has been shown to inhibit CYP2D6 *in vitro*, but meloxicam does not.

### Monitoring Parameters

- Efficacy
- Patient tolerance
- Renal function
- Stool guaiac

#### References:

1. Gold Standard, Inc. Meloxicam. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. Gold Standard, Inc. Celecoxib. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
3. Solomon DH. Overview of selective COX-2 inhibitors. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. Accessed November 04, 2019.

## Diltiazem Extended-Release

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
diltiazem LA (CARDIZEM LA®)	120mg once daily	will be changed to	diltiazem CD (CARDIZEM CD®)	120mg once daily
	180mg once daily			180mg once daily
	240mg once daily			240mg once daily
	300mg once daily			300mg once daily
	360mg once daily			360mg once daily
diltiazem LA (MATZIM LA®)	180mg once daily	will be changed to	diltiazem CD (CARDIZEM CD®)	180mg once daily
	240mg once daily			240mg once daily
	300mg once daily			300mg once daily

### Rationale

Diltiazem CD has comparable efficacy and safety to Diltiazem LA while being cost favorable.

### Monitoring Parameters

- Efficacy
- Patient tolerance

### References:

1. Gold Standard, Inc. Calcium Channel Blockers. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. Gold Standard, Inc. Diltiazem. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.

## Fenofibrate

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
fenofibrate capsule (LIPOFEN®)	50mg once daily	will be changed to	fenofibrate nanocrystal (TRICOR®)	48mg once daily
	150mg once daily			145mg once daily
fenofibrate tablet (FENOGLIDE®)	40mg once daily	will be changed to	fenofibrate nanocrystal (TRICOR®)	48mg once daily
	120mg once daily			145mg once daily
fenofibrate tablet (TRIGLIDE®)	160mg once daily	will be changed to	fenofibrate nanocrystal (TRICOR®)	145mg once daily
fenofibrate micronized capsule (ANTARA®)	30mg once daily	will be changed to	fenofibrate nanocrystal (TRICOR®)	48mg once daily
	43mg once daily			145mg once daily
	90mg once daily			
	130mg once daily			
fenofibric acid capsule (TRILIPIX®)	45mg once daily	will be changed to	fenofibrate nanocrystal (TRICOR®)	48mg once daily
	135mg once daily			145mg once daily
fenofibric acid tablet (FIBRICOR®)	105mg once daily	will be changed to	fenofibrate nanocrystal (TRICOR®)	145mg once daily

### Rationale

Fenofibrates (fibric acid derivatives) have similar efficacy for improving triglyceride and HDL cholesterol levels. Although formulations differ in bioavailability and dosage forms, safety and efficacy comparable. Fenofibrate in a nanocrystal form offers superior bioavailability to non-micronized fenofibrate.

## Monitoring Parameters

- Liver function tests
- Lipid panel
- Serum triglycerides
- Serum bilirubin (total and direct)
- Creatinine phosphokinase (CK)
- CBC

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### References:

1. Gold Standard, Inc. Fenofibrate. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
2. Rosenson RS. Lipid lowering with fibric acid derivatives. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. Accessed November 05, 2019.
3. Ling H, Luoma JT, Hilleman D. A Review of Currently Available Fenofibrate and Fenofibric Acid Formulations. *Cardiol Res.* 2013;4(2):47–55.



## Fluoxetine

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
fluoxetine tablet (SARAFEM®)	any doses requiring only full tablets	will be changed to	fluoxetine capsule (PROZAC®)	Same directions as original order

### Rationale

Fluoxetine tablets and capsules have the same efficacy and safety and capsules may still be opened for administration. Fluoxetine capsules are available at a lower cost.

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Gold Standard, Inc. Fluoxetine. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.

## Gabapentin

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
gabapentin extended release (GRALISE®)	any	will be changed to	gabapentin immediate release (NEURONTIN®)	Same total daily dose divided into three administration times
gabapentin extended release (HORIZANT®)	any			

### Rationale

Gabapentin immediate and extended release formulations have similar efficacy, safety, and adverse reaction profiles. Extended release formulations must be taken with food and cannot be crushed, making medication administration more complicated.

### Monitoring Parameters

- Efficacy
- Patient tolerance

### References:

1. Gold Standard, Inc. Gabapentin. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.

## HMG-CoA Reductase Inhibitors

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
fluvastatin (LESCOL®)	40mg once daily	will be changed to	atorvastatin (LIPITOR®)	5mg once daily
fluvastatin ER (LESCOL XL®)	80mg once daily	will be changed to	atorvastatin (LIPITOR®)	10mg once daily
lovastatin (MEVACOR®)	20mg once daily	will be changed to	atorvastatin (LIPITOR®)	5mg once daily
	40mg once daily			10mg once daily
	80mg once daily			20mg once daily
Lovastatin ER (ALTOPREV®)	20mg once daily	will be changed to	atorvastatin (LIPITOR®)	5mg once daily
	40mg once daily			10mg once daily
	80mg once daily			20mg once daily
pitavastatin (LIVALO®)	1mg once daily	will be changed to	atorvastatin (LIPITOR®)	5mg once daily
	2mg once daily			10mg once daily
	4mg once daily			20mg once daily
pravastatin (PRAVACHOL®)	20mg once daily	will be changed to	atorvastatin (LIPITOR®)	5mg once daily
	40mg once daily			10mg once daily
	80mg once daily			20mg once daily
rosuvastatin (CRESTOR®)	5mg once daily	will be changed to	atorvastatin (LIPITOR®)	10mg once daily
	10mg once daily			20mg once daily
	20mg once daily			40mg once daily
	40mg once daily			80mg once daily
simvastatin (ZOCOR®)	10mg once daily	will be changed to	atorvastatin (LIPITOR®)	5mg once daily
	20mg once daily			10mg once daily

	40mg once daily			20mg once daily
	80mg once daily			40mg once daily
simvastatin/ezetimibe (VYTORIN®)	10-10mg once daily	will be changed to	atorvastatin (LIPITOR®)	20mg once daily
	20-10mg once daily			40mg once daily
	40-10mg once daily			80mg once daily
	80-10mg once daily			80mg once daily

## Rationale

Statins vary in potency, side effect profiles and significance of drug interactions. Atorvastatin and Rosuvastatin are considered the most potent at reducing LDL. Simvastatin and Lovastatin appear likelier to cause myopathies or rare but serious rhabdomyolysis. Simvastatin, Lovastatin and Atorvastatin can have increased blood levels when taken along with strong 3A4 inhibitors. With consideration to cost, efficacy, and side effect profile, atorvastatin is the preferred product..

## Monitoring Parameters

- Liver function tests
- Lipid panel
- Creatine phosphokinase (CPK)

## References:

1. Gold Standard, Inc. HMG CoA Reductase Inhibitors (statins). Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. Gold Standard, Inc. Pravastatin. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
3. Statin Dose Comparison. Pharmacist's Letter/Prescriber's Letter August 2009 (Full update April 2018);25(8):250801

## Inhaled Corticosteroid/Long-Acting Beta Agonist Combinations

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
budesonide/formoterol HFA 80-4.5mcg (SYMBICORT®)	2 inhalations twice daily	will be changed to	fluticasone/salmeterol diskus 100-50mcg (ADVAIR®)	1 inhalation twice daily
budesonide/formoterol HFA 160-4.5mcg (SYMBICORT®)	2 inhalations twice daily	will be changed to	fluticasone/salmeterol diskus 250-50mcg (ADVAIR®)	1 inhalation twice daily
fluticasone/salmeterol HFA 44-21mcg (ADVAIR HFA®)	2 inhalations twice daily	will be changed to	fluticasone/salmeterol diskus 100-50mcg (ADVAIR®)	1 inhalation twice daily
fluticasone/salmeterol HFA 115-21mcg (ADVAIR HFA®)	2 inhalations twice daily	will be changed to	fluticasone/salmeterol diskus 250-50mcg (ADVAIR®)	1 inhalation twice daily
fluticasone/salmeterol HFA 230-21mcg (ADVAIR HFA®)	2 inhalations twice daily	will be changed to	fluticasone/salmeterol diskus 500-50mcg (ADVAIR®)	1 inhalation twice daily
fluticasone/vilanterol 100-25mcg (BREO ELLIPTA®)	1 inhalation once daily	will be changed to	fluticasone/salmeterol diskus 100-50mcg (ADVAIR®)	1 inhalation twice daily
fluticasone/vilanterol 200-25mcg (BREO ELLIPTA®)	1 inhalation once daily	will be changed to	fluticasone/salmeterol diskus 500-50mcg (ADVAIR®)	1 inhalation twice daily
mometasone/formoterol 100-5mcg (DULERA®)	2 inhalations twice daily	will be changed to	fluticasone/salmeterol diskus 250-50mcg (ADVAIR®)	1 inhalation twice daily
mometasone/formoterol 200-5mcg (DULERA®)	2 inhalations twice daily	will be changed to	fluticasone/salmeterol diskus 500-50mcg (ADVAIR®)	1 inhalation twice daily

### Rationale

Fluticasone/salmeterol (ADVAIR®) has comparable effectiveness and safety to other once- and twice-daily inhaled corticosteroid/LABA combination medications. While does twice daily, the preferred product is available as a generic product and carries a lower cost than the alternative medications.

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Clinical Resource, Inhaled Corticosteroid Dose Comparison in Asthma. Pharmacist's Letter/Prescriber's Letter, March 2019.

## Insulin

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
insulin aspart (NOVOLOG®)	any	will be changed to	insulin lispro (HUMALOG®)	Same directions as original order
insulin NPH (NOVOLIN N®)	any	will be changed to	insulin NPH (HUMULIN N®)	Same directions as original order
insulin regular (NOVOLIN R®)	any	will be changed to	insulin regular (HUMULIN R®)	Same directions as original order
insulin regular/NPH (NOVOLIN 70/30®)	any	will be changed to	insulin regular/NPH (HUMULIN 70/30®)	Same directions as original order
insulin detemir (LEVEMIR®)	any	will be changed to	insulin glargine (LANTUS/BASAGLAR®)	Same directions as original order

### Rationale

Insulins manufactured by Eli Lilly and Novo Nordisk offer similar safety and efficacy profiles. Insulin lispro is available as a generic making it preferred over insulin aspart. Insulin NPH, regular, and regular/NPH are available from Eli Lilly in 3ml presentations, reducing medication waste. Dispensing of a 3ml or 10ml vial will be determined by pharmacy using total daily dose calculations to optimize cost.

Insulins detemir and glargine offer similar safety and efficacy. Lantus and Basaglar are available at a generally lower price to the payor. The selection of Lantus or Basaglar will be made by pharmacy pursuant to any insurance preferences and lowest out-of-pocket cost.

### Monitoring Parameters

- Blood glucose
- A1C
- Patient tolerance

#### References:

1. Clinical Resource, Comparison of Insulins. Pharmacist's Letter/Prescriber's Letter. November 2019.

## Intranasal Corticosteroids

### Formulary Recommendation

Non-Formulary Medication		Formulary Alternative	
Medication		Medication	Dose & Frequency
beclomethasone nasal spray (QNASL®)	will be changed to	fluticasone propionate (FLONASE®)	50mcg same directions as ordered product
Budesonide nasal spray (RHINOCORT®)			
ciclesonide nasal spray (ZETONNA®)			
ciclesonide nasal spray (OMNARIS®)			
flunisolide nasal spray (NASAREL®)			
fluticasone furoate nasal spray (VERAMYST®)			
mometasone furoate nasal spray (NASONEX®)			
triamcinolone acetonide nasal spray (NASACORT®)			

### Rationale

Overall efficacy and safety of all nasal corticosteroids is comparable. Generic fluticasone nasal spray is generally lower cost than the alternative medications in the class.

### Monitoring Parameters

- Efficacy
- Patient tolerance

### References:

1. deShazo RD, Kemp SF. Pharmacotherapy of allergic rhinitis. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. Accessed November 04, 2019.
2. Gold Standard, Inc. Olopatadine. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
3. Gold Standard, Inc. Fluticasone. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
4. PL Detail-Document, Nasal Sprays for Allergic Rhinitis. Pharmacist's Letter/Prescriber's Letter. April 2016.

## Leukotriene Receptor Antagonists

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
zafirlukast (ACCOLATE®)	10mg twice daily	will be changed to	montelukast (SINGULAIR®)	5mg once daily
	20mg twice daily			10mg once daily

### Rationale

Leukotriene receptor antagonists are very well tolerated. Montelukast and zafirlukast have comparable indications. Zafirlukast is more costly and is dosed twice daily compared to once daily montelukast. Comparable efficacy, once a day dosing and favorable pricing suggest montelukast as preferred product.

### Monitoring Parameters

- Efficacy
- Patient Tolerance

#### References:

1. Gold Standard, Inc. Montelukast. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. Gold Standard, Inc. Zafirlukast. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
3. Riccioni G1, Della Vecchia R, Di Ilio C, D'Orazio N. Effect of the two different leukotriene receptor antagonists, montelukast and zafirlukast, on quality of life: a 12-week randomized study. Allergy Asthma Proc. 2004 Nov-Dec;25(6):445-8.



## Lidocaine Patch

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
lidocaine 5% patch (LIDODERM®)	any	will be changed to	lidocaine 4% patch (ASPERCREME WITH LIDOCAINE®)	Same directions as original order

### Rationale

Lidocaine 5% and 4% patches offer similar efficacy and safety profiles. Lidocaine 4% patches are available over-the-counter at a reduced cost when compared to the prescription-only 5% version.

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Gold Standard, Inc. Lidocaine. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.

## Megestrol Acetate

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
megestrol acetate 625mg/5ml (MEGACE ES®)	any	will be changed to	Megestrol acetate 40mg/mL (MEGACE®)	Same directions (on milligram basis) as original order

### Rationale

Megestrol and Megestrol ES are bioequivalent, however the more concentrated version carries a significantly higher cost per milligram.

### Monitoring Parameters

- Patient tolerance

#### References:

1. Gold Standard, Inc. Megestrol. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
2. Megestrol acetate: Drug information. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. Accessed November 05, 2019.

## NMDA Antagonists

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
memantine ER (NAMENDA XR®)	7mg once daily	will be changed to	memantine (NAMENDA®)	5mg twice daily
	14mg once daily			5mg AM, 10mg PM
	21mg once daily			10mg twice daily
	28mg once daily			10mg twice daily

### Rationale

Although once a day Namenda XR® is convenient, twice a day generic Namenda® presents such a significant savings that twice a day dosing with generic recommended. For optimal results it is recommended to increase dose up to target dose of 10mg twice daily as tolerated. One week or longer intervals are recommended between dose increases.

### Monitoring Parameters

- Patient Tolerance
- Neurologic function
- Serum creatinine
- Weight
- Behaviors

### References:

1. Gold Standard, Inc. Memantine. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.

## Non-Steroidal Anti-Inflammatories, topical

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
diclofenac 1.5% topical solution (PENNSAID®)	any	will be changed to	diclofenac 1% topical gel (VOLTAREN®)	2g to small joints, 4g to large joints at same frequency up to four times daily – max 32 grams daily
diclofenac 2% topical solution (PENNSAID®)	any	will be changed to	diclofenac 1% topical gel (VOLTAREN®)	2g to small joints, 4g to large joints at same frequency up to four times daily – max 32 grams daily
diclofenac 1.3% topical patch (FLECTOR®)	any	will be changed to	diclofenac 1% topical gel (VOLTAREN®)	2g to small joints, 4g to large joints four times daily – max 32 grams daily

### Rationale

All topical diclofenac presentations carry similar indications, efficacy, and side effect profiles. Diclofenac 1% gel is available generically and at a lower cost than other alternatives

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Gold Standard, Inc. Diclofenac. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.

## Ondansetron

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
ondansetron film (ZUPLENZ®)	any	will be changed to	ondansetron ODT tablet (ZOFRAN ODT®)	Same directions as original order

### Rationale

Ondansetron film and tablets offer similar safety and efficacy while ondansetron tablets are available at a lower cost to the payor. There is no significant cost difference between regular tablets and ODT tablets, therefore regular ondansetron tablets are not included in this interchange.

### Monitoring Parameters

- Efficacy
- Patient tolerance

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#### References:

1. Dadey E. Bioequivalence of ondansetron oral soluble film 8 mg (ZUPLENZ) and ondansetron orally disintegrating tablets 8 mg (ZOFRAN) in healthy adults. Am J Ther. 2015 Mar-Apr;22(2):90-7.

## Phosphate Binders

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
sevelamer hydrochloride (RENAGEL®)	any	will be changed to	sevelamer carbonate (RENVELA®)	Same directions as original order

### Rationale

Sevelamer carbonate has similar effectiveness and safety as sevelamer hydrochloride while also minimizing risk of reduced serum bicarbonate concentrations. Sevelamer carbonate is also generally lower priced than the hydrochloride form.

### Monitoring Parameters

- Serum bicarbonate
- Efficacy
- Patient tolerance

#### References:

1. Pai AB, Shepler BM. Comparison of sevelamer hydrochloride and sevelamer carbonate: risk of metabolic acidosis and clinical implications. *Pharmacotherapy*. 2009 May;29(5):554-61.

## Prostaglandins, Ophthalmic

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
bimatoprost 0.01% (LUMIGAN®)	One drop into the affected eye/s once daily	will be changed to	latanoprost 0.005% (XALATAN®)	One drop into the affected eye/s once daily
tafluprost 0.0015% (ZIOPTAN®)	One drop into the affected eye/s once daily			
travoprost 0.004% (TRAVATAN®)	One drop into the affected eye/s once daily			
travoprost 0.004%, PF (TRAVATAN Z®)	One drop into the affected eye/s once daily			
unoprostone 0.15% (RECLUSA®)	One drop into the affected eye/s twice daily			

### Rationale

Latanoprost is recommended over alternative prostaglandins due to comparable effectiveness and safety while offering cost savings.

### Monitoring Parameters

- Efficacy
- Patient tolerance

### References:

1. Gold Standard, Inc. Tafluprost. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. Gold Standard, Inc. Travoprost. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
3. Gold Standard, Inc. Latanoprost. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
4. Gold Standard, Inc. Bimatoprost. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
5. Parrish RK, Palmbert P, Sheu WP, et al. A comparison of latanoprost, bimatoprost, and travoprost in patients with elevated intraocular pressure: a 12-week, randomized, masked evaluator multicenter study. Am J Ophthalmol 2003; 135:688-703.
6. Sponsel WE1, Paris G, Trigo Y, Pena M. Comparative effects of latanoprost (Xalatan) and unoprostone (Rescula) in patients with open-angle glaucoma and suspected glaucoma. Am J Ophthalmol. 2002 Oct;134(4):552-9.

## Proton Pump Inhibitors (PPI)

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
dexlansoprazole (DEXILANT®)	30mg once daily	will be changed to	omeprazole (PRILOSEC®)	20mg once daily
	60mg once daily			
esomeprazole (NEXIUM®)	20mg once daily	will be changed to	omeprazole (PRILOSEC®)	20mg once daily
	40mg once daily			
lansoprazole (PREVACID®)	15mg once daily	will be changed to	omeprazole (PRILOSEC®)	20mg once daily
	30mg once daily			
omeprazole (PRILOSEC®)	40mg once daily	will be changed to	omeprazole (PRILOSEC®)	20mg once daily
rabeprazole (ACIPHEX®)	20mg once daily	will be changed to	omeprazole (PRILOSEC®)	20mg once daily

### Exclusions from Recommendations

- Patients on concomitant clopidogrel therapy are excluded from this interchange due to a documented drug interaction between clopidogrel and omeprazole.
- Patients receiving pantoprazole will not be subject to therapeutic interchange; pantoprazole is available at similar cost with similar efficacy.

### Rationale

Omeprazole is the most studied of the PPIs and in addition to favorable pricing, it also has comparable safety and efficacy compared to the other PPIs. Literature suggests safety concerns with long term use of PPIs, specifically B12 deficiency, hypomagnesemia, and increased risk for fractures, pneumonia and enteric infections. Overall need for omeprazole 40mg compared to omeprazole 20mg suggests initiating or reattempting omeprazole 20mg dose. Approximately two-thirds of PPIs are used inappropriately or longer than necessary, and chronic use (>8weeks) is not recommended.



## Monitoring Parameters

- Efficacy
- Patient tolerance

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### References:

1. Gold Standard, Inc. Proton Pump Inhibitors (PPIs). Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 04, 2019.
2. American Geriatrics Society 2015 Beers Criteria Update Expert Panel. American Geriatrics Society 2015 Updated Beers Criteria for Potentially Inappropriate Medication Use in Older Adults. J Am Geriatr Soc; 63(11).
3. Proton Pump Inhibitors: Appropriate Use and Safety Concerns. Pharmacist's Letter 2015; 31(9):310907.
4. Strand DS, Kim D, Peura DA. 25 Years of Proton Pump Inhibitors: A Comprehensive Review. Gut Liver. 2017;11(1):27–37.

## Short-Acting Beta Agonists

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
albuterol HFA 90mcg (PROAIR®)	any	will be changed to	albuterol HFA 90mcg (VENTOLIN HFA®)	Same directions as original order
albuterol respiclick 90mcg (PROAIR RESPICLICK®)	any			
albuterol HFA 90mcg (PROVENTIL HFA®)	any			
levalbuterol HFA 45mcg (XOPENEX HFA®)	any			
levalbuterol solution (XOPENEX®)	0.31mg/3mL	will be changed to	albuterol 2.5mg/3mL (VENTOLIN®)	Same directions as original order
	0.63mg/3mL			
	1.25mg/3mL			

### Rationale

Albuterol and levalbuterol inhalers all show comparable effectiveness and safety, with the Ventolin HFA equivalent generally exhibiting the lowest cost. In patients with COPD, albuterol and levalbuterol nebulizer solution provides similar effectiveness and safety across doses, however, albuterol solution is lower cost.

### Monitoring Parameters

- Efficacy
- Patient tolerance

#### References:

1. Gold Standard, Inc. Albuterol. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
2. Gold Standard, Inc. Levalbuterol. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
3. Lemanske RF Jr. Beta agonists in asthma: Acute administration and prophylactic use. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. Accessed November 05, 2019.

## Urinary Incontinence Agents (Antimuscarinics)

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
darifenacin (ENABLEX®)	7.5mg once daily	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
	15mg once daily			10mg once daily
fesoterodine (TOVIAZ®)	4mg once daily	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
	8mg once daily			10mg once daily
oxybutynin transdermal gel (GELNIQUE®)	1 gram once daily	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
oxybutynin transdermal patch (OXYTROL®)	3.9mg/hr	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
oxybutynin IR (DITROPAN®)	≤ 15mg TDD*	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
	>15mg TDD*			10mg once daily
solifenacin (VESICARE®)	5mg once daily	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
	10mg once daily			10mg once daily
tolterodine (DETROL®)	1mg twice daily	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
	2mg twice daily			10mg once daily
tolterodine ER (DETROL LA®)	2mg once daily	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
	4mg once daily			10mg once daily
trospium (SANCTURA®)	20mg once daily	will be changed to	oxybutynin ER (DITROPAN XL®)	5mg once daily
	20mg twice daily			10mg once daily
trospium ER (SANCTURA XR®)	60mg once daily	will be changed to	oxybutynin ER (DITROPAN XL®)	10mg once daily

## Exclusions from Recommendations

- Patients requiring medications to be crushed are excluded from this interchange.

## Rationale

Extended Release oxybutynin provides more consistent drug levels and therefore, potentially less acute anticholinergic side effects such as dizziness and confusion. Overall efficacy is comparable among this drug class.

## Monitoring Parameters

- Efficacy
- Patient tolerance

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### References:

1. Lukacz ES. Treatment of urinary incontinence in women. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. Accessed November 05, 2019.
2. Gold Standard, Inc. Oxybutynin. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.
3. National Guideline Clearinghouse (NGC). Guideline summary: American Geriatrics Society updated Beers Criteria for potentially inappropriate medication use in older adults. In: National Guideline Clearinghouse (NGC) [Web site]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ). Available: <http://www.guideline.gov>. Accessed: November 05, 2019.
4. Hesch K. Agents for treatment of overactive bladder: a therapeutic class review. Proc (Bayl Univ Med Cent). 2007;20(3):307-14.

## Venlafaxine Extended-Release

### Formulary Recommendation

Non-Formulary Medication			Formulary Alternative	
Medication	Dose & Frequency		Medication	Dose & Frequency
venlafaxine ER tablet	37.5mg once daily	will be changed to	venlafaxine ER capsule (EFFEXOR XR®)	37.5mg once daily
	75mg once daily			75mg once daily
	150mg once daily			150mg once daily
	225mg once daily			150mg once daily + 75mg once daily

### Rationale

Venlafaxine extended-release capsules and tablets are considered equivalent on a milligram basis but are not AB rated. Venlafaxine extended release capsules are priced significantly lower when compared to extended release tablets.

### Monitoring Parameters

- Liver function tests
- Lipid panel
- Serum triglycerides
- Serum bilirubin (total and direct)
- Creatinine phosphokinase (CK)
- CBC

#### References:

1. Gold Standard, Inc. Venlafaxine. Clinical Pharmacology [database online]. Available at: <http://www.clinicalpharmacology.com>. Accessed: November 05, 2019.

## BROWN COUNTY HEALTH & HUMAN SERVICES

111 N. Jefferson Street  
P.O. Box 22188  
Green Bay, WI 54305-3600



Phone (920) 448-6000 Fax (920) 448-6166

Erik Pritzl, Executive Director

To: Human Services Board and Human Services Committee

Date: January 9, 2020

Subject: 11/30/19 YTD Financial Results and Year End Projection for CTC and Community Services

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### Community Treatment Center

The Community Treatment Center through 11/30/19 shows total revenues at 100.3% of the annual budget and expenses at 93.3% compared to a benchmark of 91.7% year-to-date for 11 of 12 months. This has created a considerable favorable budget variance which is anticipated to continue through December. Included at the bottom of the attached CTC 11/30/19 summary income statement is a projection of 2019 annual results which shows an estimated year-end result of \$140,885 excess revenue over expense. Because of the CTC budgeted deficit amount of \$536,450 which represents primarily non-cash depreciation expense, this projected result would create an annual favorable budget variance of \$677,335.

Higher hospital census for NPC and the unanticipated prior year Nursing Home supplemental funding payment of \$514,992 received in 2019 are the two largest factors contributing to this projected favorable budget variance.

### Community Services

Financial results through November for Community Services include revenues at 90.5% of the annual budget or 1.2% below the benchmark of 91.7% for 11 months. Expenses are at 91.3% or 0.4% under the benchmark. This results in an 11/30 YTD deficit of \$439,025. However, this deficit will be offset by significantly favorable WIMCR and CCS 2018 cost report settlements received from the state in December. As shown in the 2019 year-end projection included at the bottom of the attached 11/30/19 summary income statement for Community Services, this favorable cost settlement impact is \$941,237. Including this favorable impact, the projected 2019 year-end financial result is \$167,300 excess revenue over expense.

The unfavorable YTD revenue variance noted above is due primarily to the 2018 prior year CLTS and CCOP adjustment of \$336,498 recorded in June. The Shelter Care capital outlay project for bathroom renovations is partially complete at year-end with approximately half of the \$153,000 project completed as of 12/31/19, so a budget carryover request is needed for completion of the project in early 2020.

In November a significant budget adjustment was recorded in the amount of \$1,932,416 which increased purchased services from providers for expanded CLTS services in 2019 and revenue provided by the state to pay for these services based on the ongoing DHS initiative to eliminate the waiting list state-wide for children in need of these services.

Respectfully Submitted,

Eric Johnson  
Finance Manager

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## Community Treatment Center

Through 11/30/19  
Prior Fiscal Year Activity Included  
Summary Listing

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year YTD
<b>Fund 630 - Community Treatment Center</b>								
<b>REVENUE</b>								
Property taxes	3,200,420.00	.00	3,200,420.00	266,701.67	2,933,718.37	266,701.63	91.7%	2,932,609.13
Intergov Revenue	4,194,042.00	.00	4,194,042.00	393,963.32	4,578,190.80	(384,148.80)	109.2%	4,311,208.29
Public Charges	4,004,411.00	1,501.00	4,005,912.00	410,487.34	4,191,732.43	(185,820.43)	104.6%	4,231,542.19
Miscellaneous Revenue	1,554,137.00	.00	1,554,137.00	114,167.43	1,295,275.79	258,861.21	83.3%	1,374,611.38
Other Financing Sources	.00	155,693.00	155,693.00	.00	155,693.00	.00	100.0%	58,565.00
<b>REVENUE TOTALS</b>	<b>\$12,953,010.00</b>	<b>\$157,194.00</b>	<b>\$13,110,204.00</b>	<b>\$1,185,319.76</b>	<b>\$13,154,610.39</b>	<b>(\$44,406.39)</b>	<b>100.3%</b>	<b>\$12,908,535.99</b>
<b>EXPENSE</b>								
Personnel Costs	9,134,103.00	120,194.00	9,254,297.00	850,567.36	8,565,386.18	688,910.82	92.6%	8,767,364.00
Operating Expenses	4,305,357.00	87,000.00	4,392,357.00	406,930.18	4,170,533.88	144,602.25	94.9%	3,894,621.49
Outlay	87,000.00	(87,000.00)	.00	.00	836.32	(836.32)	+++	1,305.58
<b>EXPENSE TOTALS</b>	<b>\$13,526,460.00</b>	<b>\$120,194.00</b>	<b>\$13,646,654.00</b>	<b>\$1,257,497.54</b>	<b>\$12,736,756.38</b>	<b>\$832,676.75</b>	<b>93.3%</b>	<b>\$12,663,291.07</b>
<b>Fund 630 - Community Treatment Center Totals</b>								
<b>REVENUE TOTALS</b>	<b>12,953,010.00</b>	<b>157,194.00</b>	<b>13,110,204.00</b>	<b>1,185,319.76</b>	<b>13,154,610.39</b>	<b>(44,406.39)</b>	<b>100.3%</b>	<b>12,908,535.99</b>
<b>EXPENSE TOTALS</b>	<b>13,526,460.00</b>	<b>120,194.00</b>	<b>13,646,654.00</b>	<b>1,257,497.54</b>	<b>12,736,756.38</b>	<b>832,676.75</b>	<b>93.3%</b>	<b>12,663,291.07</b>
<b>Grand Totals</b>	<b>(\$573,450.00)</b>	<b>\$37,000.00</b>	<b>(\$536,450.00)</b>	<b>(\$72,177.78)</b>	<b>\$417,854.01</b>	<b>(\$877,083.14)</b>		<b>\$245,244.92</b>
Less: \$514,992 prior year nursing home supplemental revenue payment recorded in August 2019					(\$97,138)			
Annualized based on 11/30 YTD results adjusted for prior year nursing home supplemental payment					(\$105,969)			
Add back \$514,992 prior year nursing home supplemental revenue payment					\$514,992			
Expenditures in Dec. for special foundation repair project & dietary equipment					(\$71,000)			
Reserve for unexpected year-end expenses or revenue adjustments					(\$100,000)			
Projected year-end financial result for Community Treatment Center					<u>\$140,885</u>	Favorable budget variance \$677,335		



## Community Services

Through 11/30/19  
Prior Fiscal Year Activity Included  
Summary Listing

Account Classification	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% Used/ Rec'd	Prior Year YTD
<b>Fund 201 - Community Services</b>								
<b>REVENUE</b>								
Property taxes	15,986,348.00	.00	15,986,348.00	1,332,195.69	14,654,152.59	1,332,195.41	91.7%	14,825,046.50
Intergov Revenue	33,020,137.00	2,398,097.00	35,418,234.00	2,862,639.79	31,644,211.91	3,774,022.09	89.3%	29,425,271.55
Public Charges	2,263,051.00	11,400.00	2,274,451.00	199,858.01	2,139,524.73	134,926.27	94.1%	1,916,459.49
Miscellaneous Revenue	86,250.00	54,139.00	140,389.00	15,263.48	224,120.25	(83,731.25)	159.6%	174,973.88
Other Financing Sources	36,639.00	578,352.00	614,991.00	.00	614,991.00	.00	100.0%	267,070.38
<b>REVENUE TOTALS</b>	<b>\$51,392,425.00</b>	<b>\$3,041,988.00</b>	<b>\$54,434,413.00</b>	<b>\$4,409,956.97</b>	<b>\$49,277,000.48</b>	<b>\$5,157,412.52</b>	<b>90.5%</b>	<b>\$46,608,821.80</b>
<b>EXPENSE</b>								
Personnel Costs	20,122,872.00	909,899.00	21,032,771.00	1,713,451.35	18,897,578.55	2,135,192.45	89.8%	17,982,608.48
Operating Expenses	31,141,553.00	2,107,589.00	33,249,142.00	2,658,304.88	30,818,447.44	2,423,305.99	92.7%	30,151,942.94
Outlay	128,000.00	49,500.00	177,500.00	.00	.00	177,500.00	0.0%	30,537.03
<b>EXPENSE TOTALS</b>	<b>\$51,392,425.00</b>	<b>\$3,066,988.00</b>	<b>\$54,459,413.00</b>	<b>\$4,371,756.23</b>	<b>\$49,716,025.99</b>	<b>\$4,735,998.44</b>	<b>91.3%</b>	<b>\$48,165,088.45</b>
<b>Fund 201 - Community Services Totals</b>								
<b>REVENUE TOTALS</b>	<b>51,392,425.00</b>	<b>3,041,988.00</b>	<b>54,434,413.00</b>	<b>4,409,956.97</b>	<b>49,277,000.48</b>	<b>5,157,412.52</b>	<b>90.5%</b>	<b>46,608,821.80</b>
<b>EXPENSE TOTALS</b>	<b>51,392,425.00</b>	<b>3,066,988.00</b>	<b>54,459,413.00</b>	<b>4,371,756.23</b>	<b>49,716,025.99</b>	<b>4,735,998.44</b>	<b>91.3%</b>	<b>48,165,088.45</b>
<b>Grand Totals</b>	<b>\$0.00</b>	<b>(\$25,000.00)</b>	<b>(\$25,000.00)</b>	<b>\$38,200.74</b>	<b>(\$439,025.51)</b>	<b>\$421,414.08</b>		<b>(\$1,556,266.65)</b>
Annualized for 12 months based on 11/30 YTD results					(\$478,937)			
Dec. Outlay expenditures estimate for 2019 Shelter Care bathroom project & vehicle purchase					(\$95,000)			
Reserve for unexpected expenses or revenue adjustments					(\$200,000)			
WIMCR & CCS 2018 cost report settlements over budget					\$941,237			
Estimated year-end projection for Community Services					<u>\$167,300</u>	Favorable budget variance \$192,300		



**BROWN COUNTY COMMUNITY TREATMENT CENTER  
NOVEMBER 2019 BAY HAVEN STATISTICS**

	NOVEMBER	YTD 2019	YTD 2018		NOVEMBER	YTD 2019	YTD 2018
<b>ADMISSIONS</b>							
Voluntary - Mental Illness	29	357	287	<b>AVERAGE DAILY CENSUS</b>	10.6	7.7	8.9
Emergency Detention - Mental Illness	0	0	0				
Return from Conditional Release	0	0	0	<b>INPATIENT SERVICE DAYS</b>	317	2580	2988
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	0	0	<b>BED OCCUPANCY</b>	70%	51%	60%
Other - EPP	1	2	11				
<b>TOTAL</b>	<b>30</b>	<b>359</b>	<b>298</b>	<b>DISCHARGES</b>	<b>29</b>	<b>355</b>	<b>296</b>
<b>READMIT WITHIN 30 DAYS</b>				<b>DISCHARGE DAYS</b>	196	2655	2687
Readmit within 30 days	2	28	33				
				<b>AVERAGE LENGTH OF STAY</b>	7	7.5	9
<b>IN/OUT</b>	<b>3</b>	<b>22</b>	<b>29</b>				
<b>ADMISSIONS BY COUNTY</b>				<b>AVERAGE LOS BY COUNTY</b>			
Brown	28	320	255	Brown	7	8	16
Door	1	10	2	Door	4	3	1
Kewaunee	0	4	1	Kewaunee	0	1	0
Oconto	0	6	9	Oconto	0	1	9
Marinette	0	0	0	Marinette	0	0	0
Shawano	0	9	18	Shawano	0	1	4
Waupaca	0	0	1	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	1	4	6	Outagamie	1	2	4
Manitowoc	0	1	1	Manitowoc	0	0	0
Winnebago	0	0	1	Winnebago	0	0	0
Other	0	5	4	Other	0	4	12
<b>TOTAL</b>	<b>30</b>	<b>359</b>	<b>298</b>	<b>TOTAL</b>	<b>7</b>	<b>7</b>	<b>9</b>

**BROWN COUNTY COMMUNITY TREATMENT CENTER  
NOVEMBER 2019 NICOLET PSYCHIATRIC CENTER STATISTICS**

	NOVEMBER	YTD 2019	YTD 2018		NOVEMBER	YTD 2019	YTD 2018
<b>ADMISSIONS</b>							
				<b>AVERAGE DAILY CENSUS</b>			
Voluntary - Mental Illness	33	184	159		11.2	12.1	11.4
Emergency Detention - Mental Illness	19	343	460				
				<b>INPATIENT SERVICE DAYS</b>			
Return from Conditional Release	6	88	79		337	4034	3794
Court Order - Prelim Mental Illness	0	0	0				
				<b>BED OCCUPANCY</b>			
Court Order - Final Hearing	0	7	6		70%	75%	71%
Other 3 Party Petition	1	1	1				
<b>TOTAL</b>	<b>59</b>	<b>623</b>	<b>705</b>	<b>DISCHARGES</b>	<b>55</b>	<b>622</b>	<b>707</b>
<b>READMIT WITHIN 30 DAYS</b>				<b>DISCHARGE DAYS</b>			
Readmit within 30 days	8	82	65		303	3992	3684
				<b>AVERAGE LENGTH OF STAY</b>			
					6	6	5
<b>IN/OUT</b>	<b>3</b>	<b>26</b>	<b>17</b>				
<b>ADMISSIONS BY COUNTY</b>				<b>AVERAGE LOS BY COUNTY</b>			
Brown	53	547	578	Brown	6	7	5
Door	0	6	10	Door	0	1	5
Kewaunee	0	3	5	Kewaunee	0	2	2
Oconto	0	11	18	Oconto	0	1	1
Marinette	1	2	12	Marinette	3	2	1
Shawano	0	6	8	Shawano	0	1	1
Waupaca	0	0	3	Waupaca	0	0	2
Menominee	1	4	0	Menominee	3	2	0
Outagamie	0	9	18	Outagamie	0	1	3
Manitowoc	0	9	15	Manitowoc	0	4	1
Winnebago	0	0	2	Winnebago	0	0	0
Other	4	26	36	Other	10	8	10
<b>TOTAL</b>	<b>59</b>	<b>623</b>	<b>705</b>	<b>TOTAL</b>	<b>6</b>	<b>6</b>	<b>5</b>

Bayshore Village  
NOVEMBER  
2019 Statistics

NURSING HOME			
ADMISSIONS	NOV 2019	Yr to Date 2019	Yr to Date 2018
From Nicolet Psychiatric Center	0	1	0
From General Hospital	0	1	1
From Nursing Home	0	6	3
From Home	0	0	1
From Residential Care Facilities	0	1	1
Protective Placement	2	23	24
Other	0	0	1
Total	2	32	31
Re-admit from hospital stay (Unit chart was not closed)	1	2	0
DISCHARGES	NOV 2019	Yr to Date 2019	Yr to Date 2018
To Nicolet Psychiatric Center	0	0	1
To General Hospital	0	0	0
To Nursing Home	0	0	1
To Home	0	1	6
To Alternate Care Programs	0	0	0
To Residential Care Facilities	0	9	6
Expired	0	13	18
Other	0	1	5
Total	0	24	37
Bed Occupancy Including Payable (Bed Hold Days)	99.5	96.0	95.5
D/C to Hospital (Unit chart not closed)	1	2	0
Total Service Days	NOV 2019	Yr to Date 2019	Yr to Date 2018
SNF - (Skilled Nursing Facility)	1881	20232	20100
Paid Bed Hold Days	6	47	118
Total Payable Days	1887	20279	20218
Unpaid Bed Hold Days	0	5	13
Total	1887	20284	20231
Number days D/C to hospital (not billable)	1	1	0
Average Daily Census	NOV 2019	Yr to Date 2019	Yr to Date 2018
Avg. Census (Payable Days) (total days/total beds)	99.8	96.4	96.1
Avg. Census (All Days) (total days/total beds)	99.8	96.4	96.1
Avg. Daily Census Bayshore Village(63 Beds)	62.7	60.7	60.5
** Nursing Home client with DD1A Level of Care			

**BROWN COUNTY COMMUNITY TREATMENT CENTER  
DECEMBER 2019 BAY HAVEN STATISTICS**

	DECEMBER	YTD 2019	YTD 2018		DECEMBER	YTD 2019	YTD 2018
<b>ADMISSIONS</b>							
Voluntary - Mental Illness	19	376	309	<b>AVERAGE DAILY CENSUS</b>	10.1	7.9	8.8
Emergency Detention - Mental Illness	0	0	0				
Return from Conditional Release	0	0	0	<b>INPATIENT SERVICE DAYS</b>	313	2893	3218
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	0	0	<b>BED OCCUPANCY</b>	67%	53%	59%
Other - EPP	1	3	11				
<b>TOTAL</b>	<b>20</b>	<b>379</b>	<b>320</b>	<b>DISCHARGES</b>	<b>22</b>	<b>377</b>	<b>317</b>
<b>READMIT WITHIN 30 DAYS</b>				<b>DISCHARGE DAYS</b>	<b>149</b>	<b>2804</b>	<b>2809</b>
Readmit within 30 days	1	29	36				
				<b>AVERAGE LENGTH OF STAY</b>	7	7.4	9
<b>IN/OUT</b>	<b>3</b>	<b>25</b>	<b>31</b>				
<b>ADMISSIONS BY COUNTY</b>				<b>AVERAGE LOS BY COUNTY</b>			
Brown	20	340	274	Brown	7	8	11
Door	0	10	3	Door	0	1	4
Kewaunee	0	4	3	Kewaunee	0	0	1
Oconto	0	6	9	Oconto	0	0	5
Marinette	0	0	0	Marinette	0	0	0
Shawano	0	9	18	Shawano	0	0	2
Waupaca	0	0	1	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	0	4	6	Outagamie	0	1	2
Manitowoc	0	1	1	Manitowoc	0	0	0
Winnebago	0	0	1	Winnebago	0	0	0
Other	0	5	4	Other	0	2	6
<b>TOTAL</b>	<b>20</b>	<b>379</b>	<b>320</b>	<b>TOTAL</b>	<b>7</b>	<b>7</b>	<b>9</b>

**BROWN COUNTY COMMUNITY TREATMENT CENTER  
DECEMBER 2019 NICOLET PSYCHIATRIC CENTER STATISTICS**

	DECEMBER	YTD 2019	YTD 2018		DECEMBER	YTD 2019	YTD 2018
<b>ADMISSIONS</b>							
Voluntary - Mental Illness	26	210	183	<b>AVERAGE DAILY CENSUS</b>	12.2	12.1	11.3
Emergency Detention - Mental Illness	26	369	494				
Return from Conditional Release	5	93	86	<b>INPATIENT SERVICE DAYS</b>	378	4412	4133
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	2	9	6	<b>BED OCCUPANCY</b>	76%	76%	71%
Other	0	1	1				
<b>TOTAL</b>	<b>59</b>	<b>682</b>	<b>770</b>	<b>DISCHARGES</b>	<b>60</b>	<b>682</b>	<b>768</b>
<b>READMIT WITHIN 30 DAYS</b>				<b>DISCHARGE DAYS</b>	<b>378</b>	<b>4370</b>	<b>4124</b>
Readmit within 30 days	4	86	73				
				<b>AVERAGE LENGTH OF STAY</b>	6	6	5
<b>IN/OUT</b>	<b>4</b>	<b>30</b>	<b>21</b>				
<b>ADMISSIONS BY COUNTY</b>				<b>AVERAGE LOS BY COUNTY</b>			
Brown	51	598	631	Brown	6	6	6
Door	1	7	14	Door	4	2	5
Kewaunee	0	3	5	Kewaunee	0	1	1
Oconto	2	13	18	Oconto	5	3	1
Marinette	1	3	12	Marinette	5	4	0
Shawano	1	7	8	Shawano	2	1	0
Waupaca	0	0	3	Waupaca	0	0	6
Menominee	0	4	0	Menominee	0	1	0
Outagamie	1	10	22	Outagamie	0	1	4
Manitowoc	1	10	18	Manitowoc	0	2	3
Winnebago	0	0	2	Winnebago	0	0	0
Other	1	27	37	Other	4	6	5
<b>TOTAL</b>	<b>59</b>	<b>682</b>	<b>770</b>	<b>TOTAL</b>	<b>6</b>	<b>6</b>	<b>5</b>

Bayshore Village  
December  
2019 Statistics

NURSING HOME			
	DEC 2019	Yr to Date 2019	Yr to Date 2018
<b>ADMISSIONS</b>			
From Nicolet Psychiatric Center	0	1	0
From General Hospital	0	1	1
From Nursing Home	0	6	6
From Home	0	0	2
From Residential Care Facilities	0	1	1
Protective Placement	2	25	25
Other	0	0	1
Total	2	34	36
Re-admit from hospital stay (Unit chart was not closed)	1	2	0
<b>DISCHARGES</b>			
To Nicolet Psychiatric Center	0	0	1
To General Hospital	0	0	0
To Nursing Home	0	0	2
To Home	0	1	6
To Alternate Care Programs	0	0	0
To Residential Care Facilities	0	9	6
Expired	2	15	22
Other	0	1	5
Total	2	26	42
Bed Occupancy Including Payable (Bed Hold Days)	99.7	96.0	94.9
D/C to Hospital (Unit chart not closed)	1	2	0
<b>Total Service Days</b>			
SNF - (Skilled Nursing Facility)	1926	22157	21820
Paid Bed Hold Days	22	69	118
Total Payable Days	1948	22226	21938
Unpaid Bed Hold Days	0	5	22
Total	1948	22231	21960
Number days D/C to hospital (not billable)	1	1	0
<b>Average Daily Census</b>			
Avg Census (Payable Days) (total days/total beds)	99.7	96.6	95.4
Avg Census (All Days) (total days/total beds)	99.7	96.7	95.4
Avg. Daily Census Bayshore Village(63 Beds)	62.8	60.9	60.1
** Nursing Home client with DD1A Level of Care			

**BROWN COUNTY COMMUNITY TREATMENT CENTER  
JANUARY 2020 BAY HAVEN STATISTICS**

	JANUARY	YTD 2020	YTD 2019		JANUARY	YTD 2020	YTD 2019
<b>ADMISSIONS</b>							
Voluntary - Mental Illness	25	25	24	<b>AVERAGE DAILY CENSUS</b>	10.5	10.5	7.0
Emergency Detention - Mental Illness	0	0	0				
Return from Conditional Release	0	0	0	<b>INPATIENT SERVICE DAYS</b>	326	326	217
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	0	0	<b>BED OCCUPANCY</b>	70%	70%	47%
Other - EPP	0	0	0				
<b>TOTAL</b>	<b>25</b>	<b>25</b>	<b>24</b>	<b>DISCHARGES</b>	<b>23</b>	<b>23</b>	<b>21</b>
<b>READMIT WITHIN 30 DAYS</b>				<b>DISCHARGE DAYS</b>	<b>494</b>	<b>494</b>	<b>319</b>
Readmit within 30 days	3	3	1				
				<b>AVERAGE LENGTH OF STAY</b>	<b>21</b>	<b>21</b>	<b>15</b>
<b>IN/OUT</b>	<b>3</b>	<b>3</b>	<b>3</b>				
<b>ADMISSIONS BY COUNTY</b>				<b>AVERAGE LOS BY COUNTY</b>			
Brown	25	25	21	Brown	17	17	22
Door	0	0	1	Door	0	0	10
Kewaunee	0	0	1	Kewaunee	0	0	2
Oconto	0	0	1	Oconto	0	0	2
Marinette	0	0	0	Marinette	0	0	0
Shawano	0	0	0	Shawano	0	0	0
Waupaca	0	0	0	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	0	0	0	Outagamie	83	83	0
Manitowoc	0	0	0	Manitowoc	0	0	0
Winnebago	0	0	0	Winnebago	0	0	0
Other	0	0	0	Other	0	0	1
<b>TOTAL</b>	<b>25</b>	<b>25</b>	<b>24</b>	<b>TOTAL</b>	<b>21</b>	<b>21</b>	<b>15</b>

**BROWN COUNTY COMMUNITY TREATMENT CENTER  
JANUARY 2020 NICOLET PSYCHIATRIC CENTER STATISTICS**

	JANUARY	YTD 2020	YTD 2019		JANUARY	YTD 2020	YTD 2019
<b>ADMISSIONS</b>							
Voluntary - Mental Illness	17	17	15	<b>AVERAGE DAILY CENSUS</b>	13.6	13.6	13.2
Emergency Detention - Mental Illness	24	24	36				
Return from Conditional Release	10	10	7	<b>INPATIENT SERVICE DAYS</b>	423	423	408
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	1	1	1	<b>BED OCCUPANCY</b>	85%	85%	82%
Other	0	0	0				
<b>TOTAL</b>	<b>52</b>	<b>52</b>	<b>59</b>	<b>DISCHARGES</b>	<b>53</b>	<b>53</b>	<b>57</b>
<b>READMIT WITHIN 30 DAYS</b>				<b>DISCHARGE DAYS</b>	<b>417</b>	<b>417</b>	<b>321</b>
Readmit within 30 days	2	2	6				
				<b>AVERAGE LENGTH OF STAY</b>	<b>8</b>	<b>8</b>	<b>6</b>
<b>IN/OUT</b>	<b>2</b>	<b>2</b>	<b>4</b>				
				<b>AVERAGE LOS BY COUNTY</b>			
<b>ADMISSIONS BY COUNTY</b>							
Brown	46	46	49	Brown	8	8	7
Door	1	1	1	Door	25	25	20
Kewaunee	0	0	0	Kewaunee	0	0	0
Oconto	2	2	2	Oconto	6	6	5
Marinette	0	0	0	Marinette	0	0	0
Shawano	1	1	2	Shawano	1	1	5
Waupaca	0	0	0	Waupaca	0	0	0
Menominee	0	0	0	Menominee	0	0	0
Outagamie	0	0	2	Outagamie	14	14	3
Manitowoc	2	2	0	Manitowoc	6	6	0
Winnebago	0	0	0	Winnebago	0	0	0
Other	0	0	3	Other	0	0	3
<b>TOTAL</b>	<b>52</b>	<b>52</b>	<b>59</b>	<b>TOTAL</b>	<b>8</b>	<b>8</b>	<b>6</b>

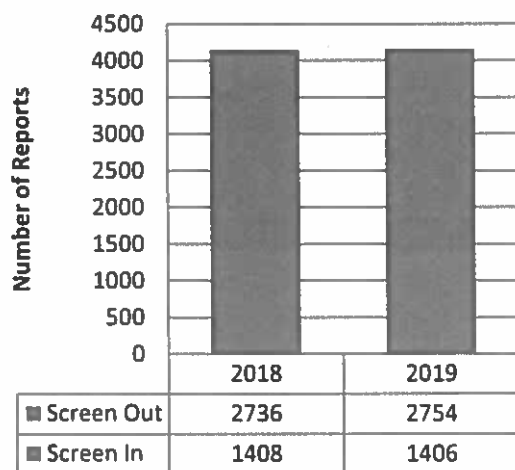


Bayshore Village  
JANUARY  
2020 Statistics

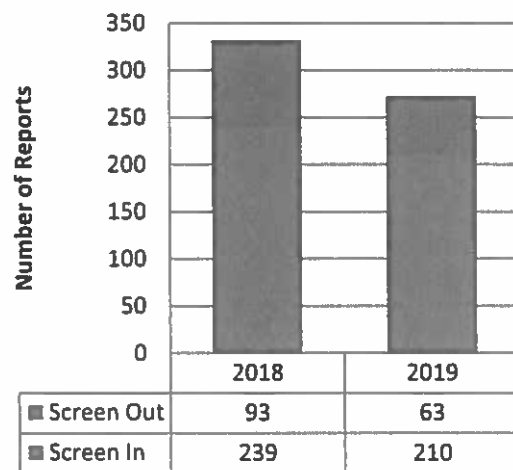
NURSING HOME			
	JAN 2020	Yr to Date 2020	Yr to Date 2019
<b>ADMISSIONS</b>			
From Nicolet Psychiatric Center	0	0	0
From General Hospital	0	0	0
From Nursing Home	3	3	3
From Home	0	0	0
From Residential Care Facilities	1	1	1
Protective Placement	2	2	2
Other	0	0	0
Total	6	6	6
Re-admit from hospital stay (Unit chart was not closed)	0	0	0
<b>DISCHARGES</b>			
To Nicolet Psychiatric Center	0	0	0
To General Hospital	0	0	0
To Nursing Home	0	0	0
To Home	0	0	0
To Alternate Care Programs	0	0	0
To Mental Retardation Facilities	0	0	0
To Residential Care Facilities	0	0	0
Expired	1	1	1
Other	0	0	0
Total	1	1	1
Bed Occupancy Including Payable (Bed Hold Days)	91.3	91.3	91.3
D/C to Hospital (Unit chart not closed)	0	2	0
<b>Total Service Days</b>			
SNF - (Skilled Nursing Facility)	1772	1772	1772
Paid Bed Hold Days	0	0	0
Total Payable Days	1772	1772	1772
Unpaid Bed Hold Days	5	5	5
Total	1777	1777	1777
Number days D/C to hospital (not billable)	0	0	0
<b>Average Daily Census</b>			
Avg. Census (Payable Days) (total days/total beds)	90.7	58.1	61.3
Avg. Census (All Days) (total days/total beds)	91.0	58.1	61.3
Avg. Daily Census Bayshore Village(63 Beds)	62.7	62.7	57.2
** Nursing Home client with DD1A Level of Care			

# Child Protection Statistics: November, 2019

## Year to Date: CPS Referrals

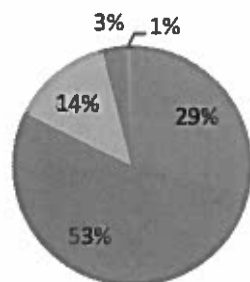


## Year to Date: Service Requests



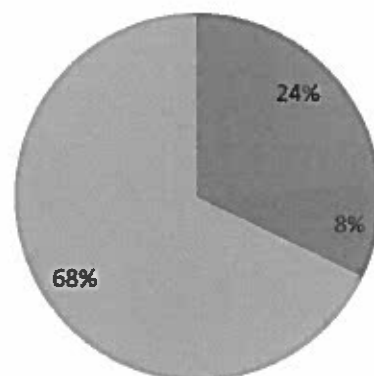
## CPS Allegation(s) of Maltreatment

- Physical Abuse
- Neglect
- Sexual Abuse
- Emotional Damage
- Unborn Child Abuse



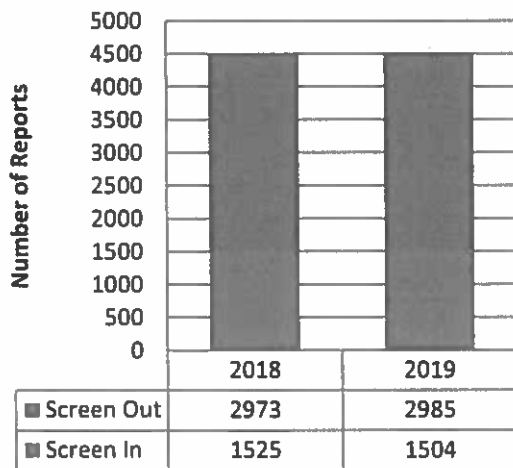
## CPS Response Times

- Same Day
- 24-48 Hours
- 5 Business Days

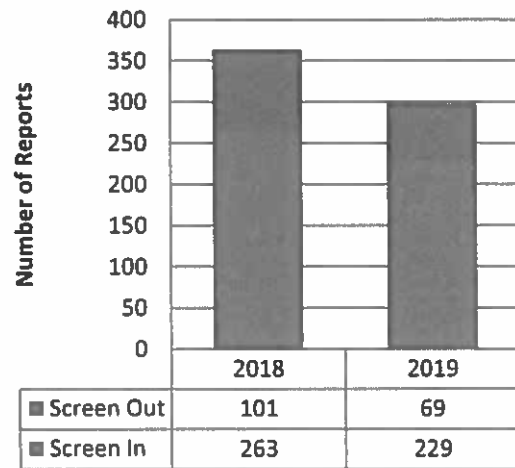


# Child Protection Statistics: December, 2019

## Year to Date: CPS Referrals

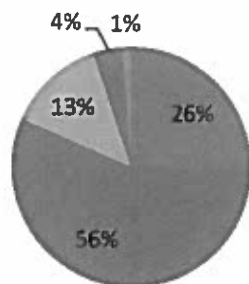


## Year to Date: Service Requests



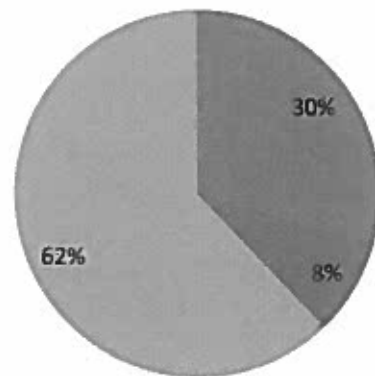
## CPS Allegation(s) of Maltreatment

- Physical Abuse
- Neglect
- Sexual Abuse
- Emotional Damage
- Unborn Child Abuse



## CPS Response Times

- Same Day
- 24-48 Hours
- 5 Business Days



Throughout all of 2019, there were 4489 child neglect and abuse referrals made to the Brown County Child Protection Unit. An overwhelming majority of the concerns reported were in regard to neglect referrals, specifically parental substance use concerns. Physical abuse concerns represented 24% of the allegations of maltreatment and sexual abuse concerns represented 15% of the allegations of maltreatment.

**HEALTH AND HUMAN SERVICES  
2019 PROVIDER CONTRACT LIST - 1/2/2020**

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
101 Mobility	Medical/therapeutic supplies and equipment and home modifications	Children	\$50,000
Acceptational Minds	Living skills for autistic and/or behaviorally-challenged children and their families	Children	\$600,000
A & J Vans	Vehicle modifications for families with disabled children	Families of disabled children	\$65,000
Adams L AFH	3-4 bed traditional adult family home	MH/AODA	\$90,000
ADL Monitoring Solutions	UA observed collection and transport for veterans treatment court	AODA adults	\$20,000
Advocates for Healthy Transitional Living	Treatment foster care placing agency, group social/learning skills, respite care, CCS Services	High behavioral needs children	\$945,000
Anderson, Campell Educational Teaching (ACE)	Daily living skills training	Children with long-term care needs	\$60,000
Anna's House Assisted Living	CBRF (assisted living)	MH/AODA	\$100,000
ASPIRO	Birth to 3 services, respite, prevocational training, adult day programming	Children with disabilities	\$910,000
Assisted Living by Hillcrest (Allouez Parkside Village #1 and #2)	CBRF (assisted living) for APS use	At-risk adults	\$75,000
Bellin Health Occupational Health Solutions	Drug screenings and transporting inpatient clients to court	Adult parents	\$10,000
Bellin Psychiatric Center	Inpatient psychiatric and detox services	MH/AODA	\$250,000
Berry House (Robert E. Berry House)	CBRF (assisted living) that takes individuals with backgrounds in violent crimes	MH	\$115,000
Better Days Mentoring	Youth mentoring services, daily living skills, CCS services	Youth	\$725,000
Boll Adult Care Concepts	Corporate adult family home (assisted living) with CCS services for high needs behavioral health	MH/AODA	\$500,000
Brotoloc Health Care System	CBRF and corporate adult family homes (assisted living)	PD with MH issues	\$500,000
Caravel Autism Health	Social learning groups for children with social communication challenges	Children with long-term care needs	\$20,000
Care for All Ages (CFAA)	CBRF (assisted living), child day care (day care used sparingly)	PD with MH issues	\$55,000
Catholic Charities of the Diocese of GB	Teen Parenting program, fiscal agent services, domestic violence group	Teens	\$160,000
CP Center	Respite and daily living skills	Children with long-term care needs	\$75,000
Childrens Service Society	Treatment foster care placing agency	Children	\$10,000
Chileda Institute	Children high-needs residential care center (RCC)	High behavioral needs children	\$175,000
Cisler Construction	Home remodeling/modifications	Families of long-term care children	\$50,000
Clarity Care	CBRF (assisted living), home health care	PD with MH issues	\$10,000
Clinicare - Milwaukee Academy	Youth (all female) high-needs residential care center (RCC); serve sex-trafficking victims	High behavioral needs children	\$145,000

**HEALTH AND HUMAN SERVICES  
2019 PROVIDER CONTRACT LIST - 1/2/2020**

<b>Provider</b>	<b>Service(s) Description</b>	<b>Target Client</b>	<b>Updated Not-to-Exceed Amount</b>
Communication Pathways	Social learning groups for children with social communication challenges	Children with long- term care needs	\$60,000
Compass Development	CBRF (assisted living)	PD with MH issues	\$62,000
Cordoba Residence	1-2 bed corporate adult family home (AKA 'Community Care Home') specializing in 1:1 care	MH needing 1:1 care	\$210,000
Curative Connections	Supportive home care, specialized transportation, prevocational training, daily living skills, CCS services	MH/AODA and LTC children	\$420,000
Curo Care	Corporate adult family homes (assisted living)	PD with MH issues	\$200,000
Deer Path Assisted Living	CBRF, corporate adult family homes (assisted living)	MH/AODA	\$120,000
Dodge County (DBA Clearview Behavioral Health)	Brain injury rehabilitation center	Adults w/traumatic brain injury	\$285,000
Dynamic Family Solutions	Family counseling/treatment programs, CCS services	Families of juvenile offenders	\$30,000
Encompass Child Care	Child day care	Children	\$50,000
Engberg AFH	1-2 bed traditional adult family home	MH	\$22,000
Exceptional Equestrians	Hippotherapy and therapeutic riding to clients with special needs	Children with long- term care needs	\$62,000
Expressive Therapies	Music therapy for children	Children with long- term care needs	\$32,000
Family Services of Northeast Wisconsin Inc.	CBRF (assisted living), CRISIS Center services, counseling, CCS services	MH/AODA, children	\$3,250,000
Family Training Program	Parenting/family skills training	CPS parents, parents of juvenile offenders	\$290,000
Family Works Programs	Treatment foster care placing agency	Children	\$25,000
Foundations Health and Wholeness	Treatment foster care placing agency and CCS Services	Children and adults	\$200,000
Friendship House	Group home for juvenile offenders	Juvenile offenders	\$100,000
The Gathering Place	CCS peer support services	MH/AODA	\$25,000
Generations Community Services	CCS services	Children	\$100,000
Golden House	Domestic abuse services	Adults in need	\$63,086
Gonzalez AFH	3-4 bed traditional adult family home	PD with MH issues	\$24,000
Goodwill Industries	Prevocational services	PD with MH issues	\$2,500
Green Bay Area Builders	Home remodeling/modifications	Families of long-term care children	\$50,000
Green Bay Transit Commission - NO CONTRACT	Bus passes for transportation to/from school, meetings with parents, etc.	CPS case children and adults	N/A
Greenfield Rehabilitation Agency	Birth to 3 services	Children with disabilities	\$510,000

**HEALTH AND HUMAN SERVICES  
2019 PROVIDER CONTRACT LIST - 1/2/2020**

<b>Provider</b>	<b>Service(s) Description</b>	<b>Target Client</b>	<b>Updated Not-to-Exceed Amount</b>
Helping Hands Caregivers	Supportive home care, children's respite	PD with MH issues; children with disabilities	\$25,000
Home Instead Senior Care	Supportive home care	PD with MH issues	\$8,000
Homes for Independent Living	CBRF (assisted living)	MH	\$200,000
Hopeful Haven	Treatment foster care placing agency	Children	\$12,000
HME Home Medical	Medical and therapeutic supplies and equipment	Children	\$55,000
Improved Living Services	Corporate adult family homes (assisted living), CCS services	MH	\$65,000
Independent Mobility Plus	Medical and therapeutic supplies and equipment	Children	\$50,000
Infinity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	\$95,000
Innovative Services	Corporate adult family home (assisted living), CCS services, daily living skills, supportive home care	High-needs MH	\$1,850,000
Jackie Nitschke Center	AODA residential and intensive outpatient services	AODA adults and youth	\$165,000
Jacobs Fence	Fence building and repair	Families of long-term care children	\$90,000
KCC Fiscal Agent Services	Payor of client-hired personal care workers		\$985,000
KUEHG - Kindercare	Child day care	Children	\$85,000
Kismet Advocacy	Mentoring, living skills for autistic and/or behaviorally-challenged children and their families	Children with long-term care needs	\$915,000
Kimbrough, Ellen AFH	1-2 bed traditional adult family home	MH	\$30,000
Lad Lake	Youth high-needs residential care center (RCC)	High behavioral needs children	\$150,000
Lutheran Social Services	CBRF (assisted living) with CCS services	MH/AODA	\$905,000
Lutheran Social Services (Homme Home)	Youth (all male) high-needs residential care center (RCC)	High behavioral needs children	\$615,000
Macht Village Programs (MVP)	Respite care, counseling, daily living skills, treatment foster care child placing agency	High behavioral needs children	\$700,000
Matthews Senior Living	CBRF (assisted living)	PD with MH issues	\$55,000
McCormick Memorial Home	CBRF (assisted living)	MH/AODA	\$60,000
Milestones Behavioral Pediatrics	Social learning groups for children with social communication challenges	Children with long-term care needs	\$20,000
MobilityWorks	Vehicle modifications for families with disabled children	Families of disabled children	\$95,000
Moon Beach Camp	Summer camp for children with autism	Children with long-term care needs	\$20,000
Mooring Programs	AODA residential services	AODA adults	\$100,000
My Brother's Keeper	Male Mentoring Program	Juvenile males	\$10,000
Mystic Meadows	Corporate AFH (assisted living)	MH/AODA	\$320,000

**HEALTH AND HUMAN SERVICES  
2019 PROVIDER CONTRACT LIST - 1/2/2020**

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
NEW Community Shelter	Homeless sheltering services	MH	\$40,000
Northwest Passage	Children high-needs residential care center (RCC)	High behavioral needs children	\$125,000
Nova Counseling Services	AODA residential services	AODA adults	\$50,000
Oconomowoc Development Training Center (Genesee Lake)	Residential care center (RCC) for lower functioning teens	Developmentally delayed youth	\$175,000
Options Counseling Services (Koinonia)	AODA residential services	AODA adults	\$35,000
Options for Independent Living	CCS peer support services, home modification assessments	MH/AODA	\$10,000
Options Treatment Program	AODA treatment	AODA youth and adults	\$40,000
Paragon Industries	Daily respite care	Children with long-term care needs	\$260,000
Parmentier AFH	3-4 bed traditional adult family home	MH	\$44,500
Pathways Treatment	AODA residential treatment for dual diagnosis clients	AODA/MH (dual diagnosis)	\$375,000
Pillar and Vine	Treatment foster care placing agency	Children	\$25,000
Prevea Health WorkMed	Drug screenings	CPS parents, AODA, JJ youth	\$85,000
PRN Home Health and Therapy (formerly Nurses PRN)	Skilled nursing services	Children	\$45,000
Productive Living Systems	Corporate adult family homes, CBRF (assisted living), supportive apartment program	MH/AODA	\$340,000
Productive Living Systems (Pnuma LLC)	CBRF (assisted living)	PD with MH issues	\$120,000
Psychological Consultants of Green Bay	Psychological assessments to determine competency	Elderly, DD	\$25,000
Ravenwood Behavioral Health	Nursing home for high-needs MH clients	High-needs MH	\$100,000
Rawhide	Residential care center (RCC) for juvenile offenders	Juvenile offenders	\$500,000
REDI Transports (Formerly WI Lock and Load)	Provides secure transportation to/from GB to other state facilities	MH, JJ	\$60,000
Rehabilitation House	Transitional CBRF (assisted living) for co-occurring AODA/MH	MH/AODA	\$60,000
REM Wisconsin	Corporate adult family home, CBRF (assisted living)	MH, PD with MH issues	\$200,000
Saint A	Treatment foster care placing agency	Children	\$42,000
Social Thinkers	Social learning groups for children with social communication challenges	Children with long-term care needs	\$22,500
Smith Receiving Home	Receiving home for emergency placements	Children in need	N/A
Spectrum Behavioral Health	CCS services	Children	\$100,000
St. Vincent Hospital	Birth to 3 services, home delivered meals	Children with disabilities	\$250,000
Tellurian	Residential detox	AODA	\$55,000
Tim Halbrook Builders	Home remodeling/modifications	Families of long-term care children	\$50,000

**HEALTH AND HUMAN SERVICES  
2019 PROVIDER CONTRACT LIST - 1/2/2020**

<b>Provider</b>	<b>Service(s) Description</b>	<b>Target Client</b>	<b>Updated Not-to-Exceed Amount</b>
Tomorrow's Children	Children high-needs residential care center (RCC)	High behavioral needs children	\$100,000
Treatment Providers (Dr. Fatoki)	Medication Assisted Treatment (MAT) for opioid abuse treatment	AODA	\$60,000
Trempealeau County Health Care	County-run adult family homes, CBRF (assisted living), and institute for mental disease	Very high-needs MH	\$1,400,000
United Translators	Interpreter/translation services	Non-english speaking	\$10,000
VanLanen Receiving Home	Receiving home for emergency placements	Children in need	N/A
Villa Hope	CBRF (assisted living), supportive apartment program	MH/AODA	\$1,400,000
Walking and Wheeling	Medical/therapeutic supplies and equipment and home modifications	Children	\$85,000
Willow Creek Behavioral Health (SBH)	Inpatient psychiatric and detox services	MH/AODA	\$200,000
Wisconsin Family Ties	Family support and advocacy services	Parents of MH/juvenile offenders	\$26,000



**HEALTH AND HUMAN SERVICES  
2020 PROVIDER CONTRACT LIST - 2/4/2020**

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
101 Mobility (Mobility 101 in Avatar)	Medical/therapeutic supplies and equipment and home modifications	Children	\$35,000
Acceptational Minds	Living skills for autistic and/or behaviorally-challenged children and their families	Children	\$500,000
A & J Vans	Vehicle modifications for families with disabled children	Families of disabled children	\$65,000
Adams LAFH	3-4 bed traditional adult family home	MH/AODA	\$61,500
ADL Monitoring Solutions (formerly WI Lock and Load Electronic Monitoring)	UA observed collection and transport for veterans treatment court	AODA adults	\$15,000
Advocates for HTL	Treatment foster care placing agency, group social/learning skills, respite care, CCS Services	High behavioral needs children	\$945,000
Affinity Health (St. Elizabeth Hospital & Affinity Medical Group)	Inpatient detox services	MH/AODA	\$25,000
Almost Family	Supportive home care, children's respite	PD with MH issues; children with disabilities	\$25,000
Anderson, Campell Educational Teaching (ACE)	Daily living skills training	Children with long-term care	\$60,000
Anna's House Assisted Living	CBRF (assisted living)	MH/AODA	\$100,000
ASPIRO	Birth to 3 services, respite, prevocational training, adult day programming	Children with disabilities	\$925,000
Assisted Living by Hillcrest (Allouez Parkside Village #1 and #2)	CBRF (assisted living) for APS use	At-risk adults	\$75,000
Bellin Health Occupational Health Solutions	Drug screenings and transporting inpatient clients to court	Adult parents	\$10,000
Bellin Psychiatric Center	Inpatient psychiatric and detox services	MH/AODA	\$250,000
Berry House (Robert E. Berry House)	CBRF (assisted living) that takes individuals with backgrounds in violent crimes	MH	\$115,000
Better Days Mentoring	Youth mentoring services, daily living skills, CCS services	Youth	\$750,000
Boll Adult Care Concepts	Corporate adult family home (assisted living) with CCS services for high needs behavioral health	MH/AODA	\$300,000
Brotoloc Health Care System	CBRF and corporate adult family homes (assisted living)	PD with MH issues	\$500,000
Caravel Autism Health	Social learning groups for children with social communication challenges	Children with long-term care	\$30,000
Care for All Ages (CFAA)	CBRF (assisted living), child day care (day care used sparingly)	PD with MH issues	\$60,000
Catholic Charities of the Diocese of GB	Teen Parenting program, fiscal agent services, domestic violence group	Teens	\$160,000
CP Center	Respite and daily living skills	Children with long-term care	\$65,000
Childrens Service Society	Treatment foster care placing agency	Children	\$10,000
Chileda Institute	Children high-needs residential care center (RCC)	High behavioral needs children	\$175,000
Cisler Construction	Home remodeling/modifications	Families of long-term care children	\$50,000
Clarity Care	CBRF (assisted living), home health care	PD with MH issues	\$10,000
Clinicare - Milwaukee Academy	Youth (all female) high-needs residential care center (RCC); serve sex-trafficking victims	High behavioral needs children	\$145,000
Communication Pathways	Social learning groups for children with social communication challenges	Children with long-term care	\$60,000
Compass Development	CBRF (assisted living)	PD with MH issues	\$70,000

**HEALTH AND HUMAN SERVICES  
2020 PROVIDER CONTRACT LIST - 2/4/2020**

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
Cordoba Residence	1-2 bed corporate adult family home (AKA 'Community Care Home') specializing in 1:1 care	MH needing 1:1 care	\$210,000
Curative Connections	Supportive home care, specialized transportation, prevocational training, daily living skills, CCS services	MH/AODA and LTC children	\$390,000
Curo Care	Corporate adult family homes (assisted living)	PD with MH issues	\$200,000
Deer Path Assisted Living	CBRF, corporate adult family homes (assisted living)	MH/AODA	\$145,000
Dodge County (Clearview Behavioral Health)	Brain injury rehabilitation center	Adults w/traumatic brain injury	\$285,000
Dynamic Family Solutions	Family counseling/treatment programs, CCS services	Families of juvenile offenders	\$20,000
Encompass Child Care	Child day care	Children	\$50,000
Engberg AFH	1-2 bed traditional adult family home	MH	\$22,000
Exceptional Equestrians	Hippotherapy and therapeutic riding to clients with special needs	Children with long-term care	\$65,000
Expressive Therapies	Music therapy for children	Children with long-term care	\$20,000
Family Services of Northeast Wisconsin Inc.	CBRF (assisted living), CRISIS Center services, counseling, CCS services	MH/AODA, children	\$3,250,000
Family Training Program	Parenting/family skills training	CPS parents, parents of juvenile	\$290,000
Family Works Programs	Treatment foster care placing agency	Children	\$25,000
Foundations Health and Wholeness	Treatment foster care placing agency and CCS Services	Children and adults	\$150,000
Friendship House	Group home for juvenile offenders	Juvenile offenders	\$100,000
The Gathering Place	CCS peer support services	MH/AODA	\$32,000
Generations Community Services	CCS services	Children	\$100,000
Golden House	Domestic abuse services	Adults in need	\$63,086
Gonzalez AFH	3-4 bed traditional adult family home	PD with MH issues	\$24,000
Goodwill Industries	Prevocational services	PD with MH issues	\$2,500
Green Bay Area Builders	Home remodeling/modifications	Families of long-term care children	\$50,000
Green Bay Transit Commission - NO CONTRACT	Bus passes for transportation to/from school, meetings with parents, etc.	CPS case children and adults	N/A
Greenfield Rehabilitation Agency	Birth to 3 services	Children with disabilities	\$410,000
Helping Hands Caregivers	Supportive home care, children's respite	PD with MH issues; children with disabilities	\$25,000
Home Instead Senior Care	Supportive home care	PD with MH issues	\$8,000
Homes for Independent Living	CBRF (assisted living)	MH	\$200,000
Hopeful Haven	Treatment foster care placing agency	Children	\$65,000
HME Home Medical	Medical and therapeutic supplies and equipment	Children	\$35,000
Improved Living Services	Corporate adult family homes (assisted living), CCS services	MH	\$65,000
Independent Mobility Plus	Medical and therapeutic supplies and equipment	Children	\$35,000
Infinity Care Inc.	CBRF (assisted living), home health care	PD with MH issues	\$95,000
Innovative Services	Corporate adult family home (assisted living), CCS services, daily living skills, supportive home care	High-needs MH	\$1,765,000
Jackie Nitschke Center	AODA residential and intensive outpatient services	AODA adults and youth	\$175,000
Jacobs Fence	Fence building and repair	Families of long-term care children	\$90,000
KCC Fiscal Agent Services	Payor of client-hired personal care workers		\$985,000

**HEALTH AND HUMAN SERVICES  
2020 PROVIDER CONTRACT LIST - 2/4/2020**

Provider	Service(s) Description	Target Client	Updated Not-to-Exceed Amount
KUEHG - Kindercare	Child day care	Children	\$85,000
Kismet Advocacy	Mentoring, living skills for autistic and/or behaviorally-challenged children and their families	Children with long-term care needs	\$925,000
Kimbrough, Ellen AFH	1-2 bed traditional adult family home	MH	\$30,000
Lad Lake	Youth high-needs residential care center (RCC)	High behavioral needs children	\$150,000
Lutheran Social Services	CBRF (assisted living) with CCS services	MH/AODA	\$905,000
Lutheran Social Services (Homme Home)	Youth (all male) high-needs residential care center (RCC)	High behavioral needs children	\$500,000
Macht Village Programs (MVP)	Respite care, counseling, daily living skills, treatment foster care child placing agency	High behavioral needs children	\$700,000
Matthews Senior Living	CBRF (assisted living)	PD with MH issues	\$55,000
McCormick Memorial Home	CBRF (assisted living)	MH/AODA	\$76,500
Milestones Behavioral Pediatrics	Social learning groups for children with social communication challenges	Children with long-term care	\$20,000
MobilityWorks	Vehicle modifications for families with disabled children	Families of disabled children	\$20,000
Moon Beach Camp	Summer camp for children with autism	Children with long-term care needs	\$20,000
Mooring Programs (Apricity)	AODA residential services	AODA adults	\$120,000
My Brother's Keeper	Male Mentoring Program	Juvenile males	\$10,000
Mystic Meadows	Corporate AFH (assisted living)	MH/AODA	\$320,000
NEW Community Shelter	Homeless sheltering services	MH	\$40,000
Northwest Passage	Children high-needs residential care center (RCC)	High behavioral needs children	\$125,000
Nova Counseling Services	AODA residential services	AODA adults	\$50,000
Nurses PRN Home Care	Skilled nursing services	Children	\$45,000
ODTC - Genesee Lake School	Residential care center (RCC) for lower functioning teens	Developmentally delayed youth	\$175,000
Options Counseling Services (Koinonia)	AODA residential services	AODA adults	\$35,000
Options for Independent Living	CCS peer support services, home modification assessments	MH/AODA	\$10,000
Options Treatment Program	AODA treatment	AODA youth and adults	\$20,000
Paragon Industries	Daily respite care	Children with long-term care needs	\$285,000
Parmentier AFH	3-4 bed traditional adult family home	MH	\$44,500
Pathways Treatment	AODA residential treatment for dual diagnosis clients	AODA/MH (dual diagnosis)	\$375,000
Pillar and Vine	Treatment foster care placing agency	Children	\$25,000
Prevea Health WorkMed	Drug screenings	CPS parents, AODA, JJ youth	\$90,000
Productive Living Systems	Corporate adult family homes, CBRF (assisted living), supportive apartment program	MH/AODA	\$250,000
Productive Living Systems (Pnuma LLC)	CBRF (assisted living)	PD with MH issues	\$120,000
Psychological Consultants of Green Bay	Psychological assessments to determine competency	Elderly, DD	\$25,000
Ravenwood Behavioral Health	Nursing home for high-needs MH clients	High-needs MH	\$100,000
Rawhide	Residential care center (RCC) for juvenile offenders	Juvenile offenders	\$400,000
REDI Transports	Provides secure transportation to/from GB to other state facilities	MH, JJ	\$65,000
Rehabilitation House	Transitional CBRF (assisted living) for co-occurring AODA/MH	MH/AODA	\$60,000
REM Wisconsin	Corporate adult family home, CBRF (assisted living)	MH, PD with MH issues	\$200,000

**HEALTH AND HUMAN SERVICES  
2020 PROVIDER CONTRACT LIST - 2/4/2020**

<b>Provider</b>	<b>Service(s) Description</b>	<b>Target Client</b>	<b>Updated Not-to-Exceed Amount</b>
Saint A	Treatment foster care placing agency	Children	\$42,000
Social Thinkers	Social learning groups for children with social communication challenges	Children with long-term care needs	\$22,500
Smith Receiving Home	Receiving home for emergency placements	Children in need	N/A
Spectrum Behavioral Health	CCS services	Children	\$120,000
St. Charles Youth & Family Services	Treatment foster care placing agency	Children	\$30,000
St. Vincent Hospital	Birth to 3 services, home delivered meals	Children with disabilities	\$215,000
Tellurian	Residential detox	AODA	\$55,000
Tim Halbrook Builders	Home remodeling/modifications	Families of long-term care children	\$50,000
Tomorrow's Children	Children high needs residential care center (RCC)	High behavioral needs children	\$100,000
Treatment Providers (Dr. Fatoki)	Medication Assisted Treatment (MAT) for opioid abuse treatment	AODA	\$60,000
Trempealeau County Health Care	County-run adult family homes, CBRF (assisted living), and institute for mental disease	Very high-needs MH	\$1,000,000
United Translators	Interpreter/translation services	Non-english speaking	\$10,000
VanLanen Receiving Home	Receiving home for emergency placements	Children in need	N/A
Villa Hope	CBRF (assisted living), supportive apartment program	MH/AODA	\$1,400,000
Walking and Wheeling	Medical/therapeutic supplies and equipment and home modifications	Children	\$50,000
Willow Creek Behavioral Health (SBH)	Inpatient psychiatric and detox services	MH/AODA	\$200,000
Wisconsin Family Ties	Family support and advocacy services	Parents of MH/juvenile offenders	\$26,000

**Brown County Health and Human Services**  
**New Non-Contracted and Contracted Providers**  
 January 2, 2020

REQUEST FOR NON-CONTRACTED PROVIDER			
PROVIDER	SERVICE DESCRIPTION	NOT-TO-EXCEED AMOUNT	DATE
Green Bay Fusion	Class for CLTS child	\$10,000	11/7/19
Conni's Family Day Care	Child care for CPS child	\$10,000	11/19/19
Corporate Guardians of NEW Individual	Guardianship services for clients	\$10,000	11/19/19
Individual	Respite for CPS child	\$10,000	11/10/19
Oconto Area Child Care	Short-term day care for CPS child	\$10,000	11/10/19
MJ Smith Properties	Temporary housing for CPS family	\$10,000	11/19/19
QFP Townhomes	Rent for CPS family	\$10,000	11/19/19
Shellyn Real Estate Management	Rent for CPS family	\$10,000	11/19/19
Buddy Up Tennis	Class for CLTS child	\$10,000	11/19/19
Individual	Respite for CPS child	\$10,000	11/26/19
Individual	Respite for CPS child	\$10,000	12/3/19
Tender Heart	Child care for CPS child	\$10,000	12/10/19
Individual	Security deposit for CPS family	\$10,000	12/16/19
Individual	Respite for CPS child	\$10,000	12/16/19
Hatch Properties	Rent for CPS family	\$10,000	12/16/19

REQUEST FOR NEW PROVIDER CONTRACT				
PROVIDER	SERVICE DESCRIPTION	TARGET CLIENTS	NOT-TO-EXCEED CONTRACT AMOUNT	DATE
Hopeful Haven	Treatment Foster Care Placing Agency	Children	\$12,000	11/1/19

**Brown County Health and Human Services**  
**New Non-Contracted and Contracted Providers**  
February 3, 2020

REQUEST FOR NON-CONTRACTED PROVIDER			
PROVIDER	SERVICE DESCRIPTION	NOT-TO-EXCEED AMOUNT	DATE
Tri County Heating	Special HVAC needs for CLTS child	\$10,000	1/1/20
Baby Elephants	Short-term day care for CPS child	\$10,000	1/1/20

REQUEST FOR NEW PROVIDER CONTRACT				
PROVIDER	SERVICE DESCRIPTION	TARGET CLIENTS	NOT-TO-EXCEED CONTRACT AMOUNT	DATE
St. Charles Youth & Family Services	Treatment Foster Care Placing Agency	Children	\$30,000	1/1/20